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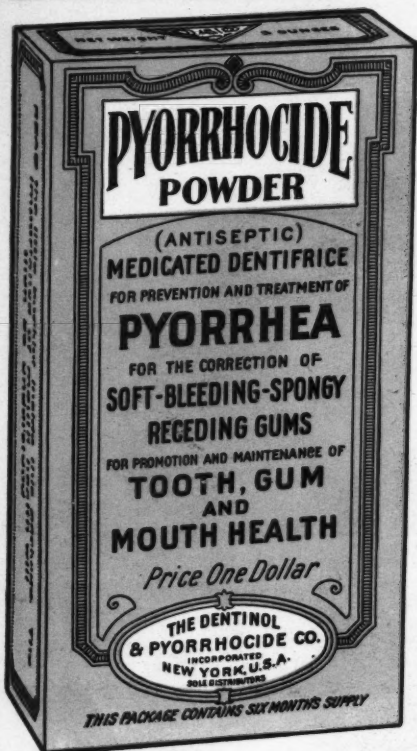
ORAL HYGIENE

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PYORRHOCIDE POWDER (Antiseptic)

is highly effective in soft, bleeding, spongy infected gum conditions.

It checks bleeding; it hardens the gums; it tends to repair broken down gum tissue; it keeps the teeth white and clean.

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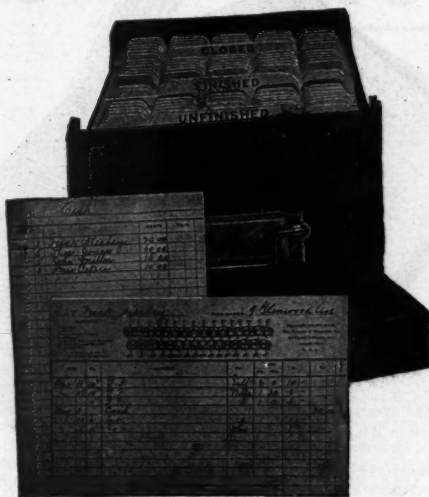
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This is a "feature" house. But **EVERY** item is a feature. The same careful attention and workmanship is given each item manufactured in our plants. The dental profession, because of its intimate dealings with human beings, must ever be on the right track to the establishment of good-will in the minds of the public. Inferior products have no place in the dentist's office.

Let us leave you with this one thought. You need never fear about the quality of any item which you have purchased if it bears the name of The Ransom & Randolph Company.

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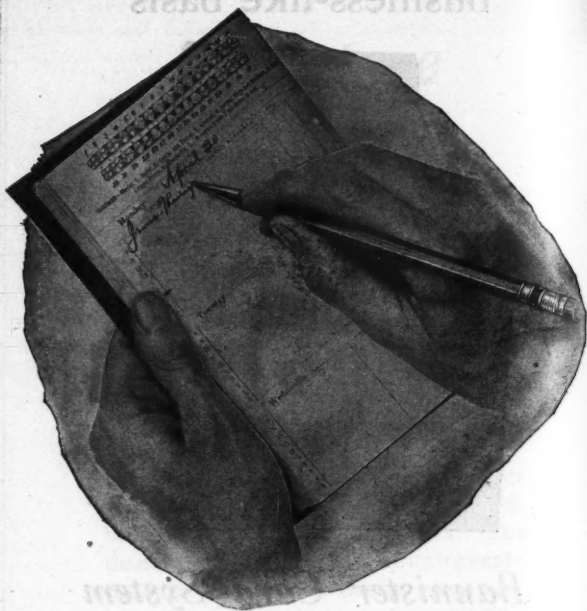
This simple and convenient system divides your accounts into "unfinished," "finished" and "closed." The cards and indices are in three distinct colors. Each card represents a complete record of the work done on the teeth as well as a complete account of payments. No dentist should attempt to run an office without this simple and inexpensive system.

Sample cards and further information will be mailed you on request.

Price No. 2 Complete with record cards ruled on both sides - - - - - **\$7.00**

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Note the illustration of a complete set of teeth numbered 1 to 32 with smaller numbers upon which to indicate the point at which operation is performed. A practical book wherein the dentist may keep not only a record of appointments but a convenient cash-received account.

Well bound and contains enough pages for one year's use. Pages are not dated. No waste.

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It does not rely upon systemic reaction, like so many remedies for post-operative pain.

It isn't *devious*—like tablets and things prescribed for self-medication on the patient's part. It isn't *devious*—it is *direct*. It is applied directly to the operative area—not just as a *remedy*—but as a *preventive* of pain. The treatment is *localized*—concentrated—where it is *needed*—so a positive result ensues.

The drugs composing it are incorporated in a *slowly absorbable* vehicle melting above body temperature. So the treatment is not only *localized*—it is *prolonged*.

When placed in contact with soft tissues, alveolar process or bone, the vehicle is *slowly absorbed*, prolonging the effect of the combined drugs.

The hundreds of dentists who tested it for several months prior to its introduction were delighted with results—and you will be!

Use it at our expense. Your dealer is authorized to give full credit if you are not entirely satisfied. Our confidence in this new product, based upon hundreds of clinical tests, prompts us to offer this unusual proposition. *Ask your dealer to send you a tube now.* Price \$1.00. DENTAL PRODUCTS COMPANY, 7512 Greenwood Ave., Chicago, U. S. A.

Q Conducto Surgical Dressing controls post-operative pain.

Lessens and often prevents post-operative hemorrhage.

Prevents ingress of debris and oral fluids.


Supplants use of gauze pack in many cases.

Anesthetizes gingival tissues, alleviating pain during instrumentation for pyorrhea.

Relieves pain due to exposure of sensory nerves in a denuded alveolar socket or traumatized bone or tissue.

CONDUCTO

Surgical Dressing



Coming Meetings

American Society of Dental Radiographers

THE mid-winter meeting of the American Society of Dental Radiographers will be held at the Drake Hotel, Chicago, Ill., Monday and Tuesday, January 14 and 15, 1924. The Program Committee is arranging an exceptionally good program.

ARNOTT A. MOORE, *President*,
131 Allen St., Buffalo, N. Y.
MARTIN DEWEY, *Sec'y-Treas.*,
501 Fifth Ave.,
New York, N. Y.

Tennessee State Dental Association

THE fifty-seventh annual meeting of the Tennessee State Dental Association will be held at Chattanooga, Tenn., May 5, 6 and 7, 1924.

C. E. BYINGTON, *President*,
James Bldg., Chattanooga, Tenn.
JOE MINOR, *Sec'y-Treas.*,
Lambuth Bldg., Nashville, Tenn.

Southern Society of Orthodontists

THE third annual meeting of the Southern Society of Orthodontists will be held at the Hermitage Hotel, Nashville, Tenn., on Monday and Tuesday, January 21 and 22, 1924. An attractive program is assured, and all those interested in orthodontia are cordially invited to be present.

OREN A. OLIVER, *President*,
440 Lambuth Bldg.,
Nashville, Tenn.
HARRY A. HOLDER, *Sec'y-Treas.*,
332 Lambuth Bldg.,
Nashville, Tenn.

Virginia State Dental Association

THE fifty-fifth annual meeting of the Virginia State Dental Association will be held at Norfolk, Va., April 28, 29 and 30, 1924. Headquarters: Monticello Hotel.

HARRY BEAR, *Sec'y*,
410 Professional Bldg.,
Richmond, Va.

Kentucky State Dental Association

THE next annual meeting of the Kentucky State Dental Association will be held in Louisville, Ky., April 7, 8, 9 and 10, 1924. Headquarters at Seelbach Hotel. A program of unusual interest is being arranged.

WM. M. RANDALL, *Sec'y*,
1035 S. Second St., Louisville, Ky.

Pennsylvania State Dental Society

THE fifty-sixth annual meeting of the Pennsylvania State Dental Society will be held in the Syria Mosque, Pittsburgh, Pa., on May 13, 14 and 15, 1924.

Dr. Leslie Waddill, Jenkins Arcade Bldg., Pittsburgh, is Chairman of Exhibits.

A. C. BARCLAY, *Rec. Sec'y*,
914-915 Highland Bldg., Pittsburgh.

Chicago Dental Society

THE annual clinic and meeting of the Chicago Dental Society will be held at the Hotel Drake, January 17, 18 and 19, 1924.

Please address the undersigned for further information.

M. M. PRINTZ, *Sec'y*,
25 E. Washington St., Chicago

Soothe The Patient

Gua-ol is a soothing, disinfecting, antiseptic, healing, clean tasting dressing for tooth sockets which are painful because infected or inflamed, or because of uncovered or unprotected bone or nerves.

Gua-ol applied in painful sockets (preferably on half-inch iodoform gauze) "stays put," mechanically aids the blood clot to form and hold, prevents the gauze from sticking to the tissues, and gives sustained relief for twenty-four hours.

Gua-ol has an immediate powerful analgesic effect but does not depend for its pain relieving action upon anesthetics, or escharotics which impair the tissues. *Gua-ol soothes and heals.*

Gua-ol is a powerful disinfectant and antiseptic (equal to phenol), is readily and deeply absorbed into the tissues where it destroys bacteria, increases circulation, and reduces inflammation—relieving pain.

Gua-ol may be applied continuously as long as the case requires, and maintains drainage.

Unlike various pastes offered for socket dressing Gua-ol leaves no residual debris to become foul and form a breeding bed for bacteria.

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Product



GUA-OL

Stops Pain!



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Operator and *patient* must be protected from the danger of not only scattered X-Rays but also from *high voltage electrical shock*.

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December, 1923

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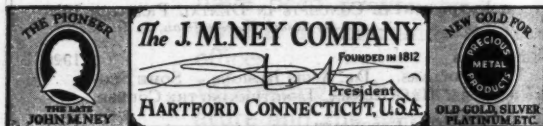
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FOUNDED 1911

DECEMBER, 1923

VOL. XIII, No. 12

Oral Hygiene, on the
threshold of its
fourteenth year, sends
heartly good wishes and
Christmas Greetings
to all the dental world.

Little Journeys to the

FOUNTAIN-HEAD

PATIENT—A fine, hearty looking specimen of manhood about fifty years of age; resides in one of the Central American States, but comes to this country every year.

1920—He came to me (one of these "Fountain-Heads?" What do you know about that?) with his teeth in rather bad condition. I skiagraphed the teeth and advised the extraction of two submerged roots of upper third molars; suggested that the root canals of a number of pulpless teeth be filled, and that all other needed dental work be done, and referred him to one of my ex-assistants for this work.

These instructions were carried out with the exception of the removal of the roots, which he put off.

1921—Returned, and root canal work was checked up satisfactorily by skiagraphing, and his teeth were gone over. He was again advised to have the two roots of the upper third molars removed, and again he put that off, as they were causing no pain.

1922—He first went north this trip, whereupon he went to an institution, of world-wide reputation, for some trifling trouble. Here his teeth were rayed and the two roots before mentioned and seven teeth were condemned to extraction. Thereupon he came back to me, reported this diagnosis and asked me, "What about it?"

I discussed with him the films which he brought, and explained to him how it was impossible to detect infection at root ends by means of the Ray, and that, therefore, the report, (with all due respect to the great institution that had given it to him) designating certain teeth, as shown by the Ray, to be infected, was absolutely worthless. I advised that the two roots be extracted, but no teeth.

By this time I began to realize that he wasn't very keen about having those two submerged roots taken out, especially as *they did not hurt*, and he decided *not* to have any of these *seven teeth extracted*, and to have the two roots extracted some other time.

By C. Emund Kells, D.D.S.,
New Orleans, Louisiana.

AD OF SCIENCE

1923—This time he landed in New York, and by now he had developed a slight arthritis (?) in his right arm, so he hied himself to one of New York's leading physicians. After giving him a rather thorough physical examination, he said that he found pus in his tonsils, and sent him to, let us say, Dr. Black, one of the leading specialists in that line, and also, let us say, to Dr. White, an oral surgeon (and a top-notch, as I well know) for an oral diagnosis.

Specialist No. 1—The tonsil man found his tonsils in a dreadful condition, and was about to arrange for their immediate removal when our friend said, "Let's not move quite so rapidly. I'll have to consider that a little." And with that, he went to see the oral surgeon.

Specialist No. 2—The oral surgeon rayed his teeth, of course. "Who did this root canal work?" inquired he. "Dr. Varnado, down in New Orleans." "Well it's mighty fine work." "That's the kind of work I expected to get when I went to him," the patient replied.

Then he advised the extraction of two of these teeth with their "mighty fine" root canal fillings, and also the two roots. As the oral surgeon uses novocain only, and the patient insisted upon gas, he was sent to specialist number three for the work.

Specialist No. 3 looks at the pictures and says, "Who did this root canal work?" "Dr. Varnado, down in New Orleans." "Well, it's a hell of a good job of root canal filling." This specialist talked "kinder rough," but he undoubtedly meant well.

"Upon looking at these pictures, I think another tooth should also be extracted," he said. But the patient decided to be guided by the oral surgeon's instruction, so the specialist removed the two submerged roots, and two teeth which I, myself, would have called perfectly good ones with "a hell of a fine root canal filling in each."

Being relieved of his teeth, our patient still had these wonderfully bad tonsils on his mind, and so he bethought himself of the fact that Mem-

this was a rich and cultured city and must naturally possess some good doctors; that he knew one of them and that as the town was on his way to New Orleans, he might as well stop over and see his friend-doctor, which he did.

Now this friend-doctor happened to stand about at the head of the profession in Memphis, and he was given an examination which he considered the most thorough that he had yet received.

He gave his tonsils a very careful examination and said, "It is true that your tonsils are not absolutely perfect, but I see no reason for their removal and I would advise against their removal."

He had his teeth skiagraphed again, of course, compared his films to the oodles of films our friend had in his possession by this time, and with the same old incredible ignorance, marked three films "infected" and one "doubtful." Then he said, "As long as you are going to New Orleans, I would suggest you go and see Dr. Kells again and get his opinion."

Then, in due time, the patient presented himself to me with all these reports and the multitude of films.

This is what I said, "I look at your case today exactly as I did three years ago, two years ago, and one year ago. Personally, I would have refused to extract these two upper first bicuspid, the root canals of which had been filled in such 'a hell of a good manner.' All the films you have presented

show me no reason for the extracting of any more teeth at this time.

"The only doubtful tooth in your head, according to my mind, is a lower third molar containing a rotten root canal filling—not the work of Dr. Varnado—and your other specialists did not advise its removal. They must have overlooked it.

"Those roots, of course, of the upper third molars were in bad condition and should have been extracted long ago, as I first advised. You tell me that you are in good condition today; that the slight attack of arthritis (?) has passed off. Then, being well, why not be satisfied and let well enough alone? You expect to return in October. Come and see me then."

"I'll follow your advice."

Now just let us summarize the tribulations of this poor man:

1. First he comes to me, just a plain dentist, and I advise him to have all those root canals filled, and to have two bad-looking roots removed.

2. He goes to another plain dentist and has a lot of "hell of good root canal fillings" inserted in those teeth, according to my advice.

3. He comes back to me (the plain dentist) and I find his teeth all satisfactory, and again the removal of the two roots.

4. Then he goes to an institution with a world-wide reputation, and it orders the extraction of seven of these teeth

which I considered all right, and likewise the two roots which I had condemned.

5. Then he comes back to me and I advise that no *teeth* be extracted—only the two bad roots—and he concludes to follow my advice and not that of the institution.

6. Then he goes to a medical diagnostician who finds his teeth and tonsils bad.

7. Then to the tonsil specialist, who wanted to take out his tonsils instantan.

8. Then to an oral surgeon, who advises the extraction of two teeth and the two roots.

9. Then to an exodontist, who takes out these two and advises the extraction of one more, which, however, was not done.

10. Then to a medical diagnostician, who advises against his having the tonsils removed, but recommends that two, and possibly three, more teeth be extracted.

11. Then back to me once more, who advise against the extraction of any more teeth.

The unfortunate patient could easily write a book on "Little Journeys to the Fountain-Heads of Science," could he not?

* * * *

Now there are several way-stations upon these "Little Journeys" that both interest and surprise me greatly:

1. In this enlightened age anyone who knows the very first thing about the Ray *knows* that infection cannot be shown upon a film; and these people, with such world-

wide reputations, deliberately display their ignorance by telling the traveler that the films show that certain of his teeth are infected. Is not that past understanding?

2. Here is a skiagraph showing a "hell of a good filling" in the root canal and the lamina dura *apparently* intact. The tooth is a good and useful tooth.

The man does not live who can truthfully say that root end is infected. There is absolutely no *practical* way of his determining whether it is infected or not. On the other hand, he has a tonsil from which *pus can be squeezed*—and two bad roots. The tonsil is *infected*; there is no doubt at all about that. Notwithstanding these facts, good and useful teeth, which are in doubt, are extracted, while infected tonsils of absolutely no value, are allowed to remain. That is too much for me.

It's a hundred-to-one shot that the two roots, which are covered by the gum, may be infected. Why not extract those two worthless roots and await results before advising the extraction of any valuable teeth?

First, last and all the time, my practice is as follows:

If a *valuable tooth* is abscessed, or *supposed to be infected*, I believe in attempting a cure by putting in a "hell of a good root canal filling." If the patient is suffering from some trouble caused by some focus of infection, then I positively

refuse to extract any *valuable* teeth *about which there may be some doubt*, just as long as the patient has an infected tonsil about which there is *no* doubt.

That looks to me to be a reasonable and conservative line of practice, and I propose to "stick to it" to the end.

In this case, I would have first extracted the two roots and then awaited results. If arthritis persisted, I would have extracted the lower third molar, not of much value and rather doubtful looking.

If no improvement, then I would have insisted upon having the infected tonsils removed before I would have extracted any of those valuable pulpless teeth.

Then, and then only, as a last resort, would I extract any pulpless teeth.

When this patient returns in

the fall, he will look up some other specialist—crown and bridge, I reckon—to replace the two first bicuspid which I consider were wantonly removed.

I really believe that if his arthritis was relieved by the extractions, it was because the roots were removed and not the teeth. I believe that if he had followed my advice from

start to finish, he would be just as well as he is today, and would have had his two good bicuspid still in place.

I may be wrong.

Next Month



In January ORAL HYGIENE we shall print another of Doctor Kells' "Little Journeys to the Fountain-heads of Science."

The January journey is to the dental colleges and is entitled

IF I WERE KING

In a subsequent issue "The School-Master Abroad," also by Dr. Kells, will appear.



The Relief Fund of the American Dental Association

An Editorial

FOR many years it has been customary at this season to sell Christmas stamps in the interest of the Relief Fund of the American Dental Association. This Fund has been steadily growing until it has now almost reached the point where it will begin the great work for which it was planned, and that is to help needy and deserving dentists when they reach the far end of life.

The dues in the American Dental Association have recently been raised and a portion of the increase will be set aside for the Relief Fund, but this will be only one of the means for raising this Fund to the desired amount.

Subscriptions and sales of Christmas Stamps will be continued. When you receive your package of stamps just send your check in immediately, and notify the Recording Angel to make another mark for you on the right-hand side of the ledger—this being one of the few ways that you can guarantee a mark where you most need it.

Know Your Patient

BEFORE EXTENDING CREDIT

By A. A. JOHNSON, of Merchants' Credit Association.

Read before the Eighth District Dental Society meeting at Athens, Ga.

THE subject of credit constitutes not one but two separate and distinct problems. They go hand in hand, and each one is dependent upon the other; you may have solved one, but not both.

The problem is whom to credit and whom not to credit.

Credit should be vigilantly watched and carefully handled. The extravagance of the prosperous years during and following the war has not ceased. Taxes, rents, transportation, clothing, food and fuel are still high, and if the family insists on "keeping up with the neighbors" by running an auto dad will be put to it to keep within his income and pay his bills.

You are all familiar with these conditions, and I feel sure you will agree with me that anyone who does a credit business should first find out and assure himself that the debtor is able as well as willing to pay.

The most serious problem we are up against is getting the business and professional people to use the information the credit association has on file, instead of "taking a shot," as some express it.

Last week I had an inquiry on a young lady who referred to two stores; our records showed that one of our members had charged off an account against her; I asked the inquirer if she had referred to them, and was informed that she did not.

My records showed: one store had had an account since spring, highest credit twenty dollars; paid satisfactorily. Another had sold two dollars this month, and account not due—therefore could not give a rating. Now for the store she "forgot" to mention: sold sixty dollars in 1920; has paid twenty-eight dollars; charged to profit and loss thirty-four dollars two years ago, which includes interest up to that date. Now if this member of the credit association had called the references she had given, the account would have been opened on report given, and the charged-off account would not have been discovered.

This should convince you that the most important part of credit is to make a thorough investigation.

But, without enlarging on this point unduly, I am going to give you ten rules to be observed in extending credit:

CREDIT



The time to find out about a patient is before the name goes on your books.

1. Know your patient before extending credit.

2. The time to find out about a patient is before the name goes on your books.

3. Insist on references, and investigate them before extending credit.

4. When the applicant hesitates to give references, *you* hesitate to give credit.

5. Have the courage to say no.

6. Explain that it is necessary to have an understanding of how the account is to be paid, and to have terms met promptly in order that you may be prompt in paying your own accounts.

7. Do not let your patients decide when they want to pay their bills; that's *your* job.

8. Remember that the possible loss of a few patients who will not pay their bills will help instead of hurt your practice.

9. Trade reports are good, but not always dependable. Learn something about character and general reputation. In other words learn the moral hazard.

10. Co-operate with your fellow practitioner in every way.

One for good measure: Don't bank too strongly on references. Remember that an undesirable will always refer to those he has paid, and say

nothing about the past-due accounts he is owing.

The granting of credit should be determined by the following three factors:

1st—Character,

2nd—Earning power,

3rd—Manner in which others have been paid, and I would rate the three in this manner:

Character 90%

Earning power 7.5%

Paying habit 2.5%

Credit is only another name for confidence. It is the power to obtain goods and services by giving a promise to pay money at a specified time in the future. Let us understand at the outset that credit is only as good and as strong as the person to whom it is granted.

Now we come to the second problem: collecting, after credit has been granted.

For whose convenience was the credit granted? Yours, or your patient's? If it was for *your* convenience, let the patient pay when he gets ready, but if for *his* convenience, *you* make *your* terms and insist that they be filled to the letter, unless adversity or sickness has afflicted the patient.

The man or woman who owes you and begins to cut the corners, when he or she sees you, should be pushed and pushed to the limit, because, besides owing you money, and keeping you out of your own, he will become a knocker and an enemy if you don't stand up for your rights.

We all have more respect for the man who demands what is justly due him. So I say, make your terms and insist that they be carried out by the patient.

Delinquent accounts are encouraged by not keeping strict watch on all accounts as they mature; by not sending out statements promptly with a request to remit.

If no returns are received by the 10th, a letter should go out calling attention to the statement, and asking advice as to payment. In your letter ask if there is any difference between the account as shown by your statement and the patient's understanding of it; suggest prompt notification so any necessary correction can be made.

Make your terms plain when service is performed; be sure the patient understands them—then if he does not fulfill his part promptly, remind him of the agreement. Insist that those who cannot pay according to pre-arranged terms come in and arrange for extension. If you are systematic and prompt in your methods of collecting, it will stimulate your debtor to at least try to do business according to your way. The longer you delay in making a dignified demand for your money, the longer time the patient will take in making settlement.

Never lead the patient to believe you are an easy, good fellow, and that you don't need your money, or that you are afraid to ask for it.

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To insure good collections four things are necessary: system, attention to accounts, a knowledge of debtor and persistence.

I have found that a very efficient way of making collections is by using the telephone.

There are people who will ignore your letters, but when you get them on the telephone they simply *have* to talk to you, and you can get at least a promise. When you do get a promise to pay on a certain day, you want to be right on the job on that day.

The time to make an account good is in the early stages. If a patient is given to understand, right at the

outset, that he is expected to pay promptly, you will find that he will do so and become a good customer, but if he is permitted to become careless in the payment of his bills without protest, you will find it hard to convert him.

* * * *

The doctor coughed gravely: "I am sorry to tell you," he said, looking down at the man in bed," that there is no doubt that you are suffering from small-pox."

"Julia," the sick man said in a faint voice, "If any of my creditors call today, tell them that at last I am in a position to give them something."

I have found that a very efficient way of making collections is by using the telephone.



The MENC

so called Tooth-Bleaching

By WILLIAM H. NITSCHE, D. S., U.



READING some of the advertisements in the newspapers one is given the impression that the day of oral hygienists has passed before it attained the full glory of its seemingly wonderful possibilities.

The oral hygienist is *passé*.

The disagreeable work of cleaning teeth has been done away with by the marvelous and miraculous discoveries of the modern laboratory. Twenty-five cents is the price of a bottle of this royal *succedaneum*, which can be purchased at any drug store or cigar shop, and, for the profession, similar preparations can be purchased at dental depots.

There is a feeling of regret and chagrin that the discovery of so valuable an aid to the preservation of the teeth should come not from the dental profession, but from some obscure, so-called laboratory or drug company, apparently interested principally in the financial return.

These preparations are guaranteed to give satisfaction without injury to the teeth, enamel or the general health.

In fact, the claim is made that they are stimulating to

the oral tissues—that they can be used with safety on children's teeth.

A series of recently extracted teeth dipped into melted wax to cover one-half of the enamel and root surface were placed into three of these preparations. At intervals of fifteen seconds, thirty seconds, one minute, two minutes, three minutes, four minutes and five minutes the teeth were removed and placed in a soda solution to stop action, rinsed with fresh water and dried.

In fifteen to thirty seconds the enamel exposed to the solution is decidedly etched and lustreless. A magnifying glass shows a distinct margin resembling the etching of a metal plate in the industries, which is also distinctly felt in drawing a metal instrument across the surface. An instrument on being drawn across the exposed surface emits the high pitched sound, best described by saying, "it sets one's teeth on edge."

Specimens left in the solution for a longer period exhibit the same characteristics but in a more pronounced degree, at five minutes the enamel being dissolved to a measurable depth.

One of the preparations sold to the profession has dissolved

*Read before the Utica Dental Society, Utica, N. Y. October 8th, 1923.

ENCE of hind Cleaning Preparations*

WITSON, S., Utica, N. Y.

practically the entire enamel down to the dentine in thirty to sixty minutes. Another of the three preparations examined is less vigorous in action, a practically complete decalcification of the enamel being obtained, however, on longer exposure, the effect being similar to the so-called white decay so commonly seen in the gingival third of the posterior teeth. These experiments can easily be duplicated by anyone.

The tooth cleaning preparation sold to the profession through dental depots is the most active. Teeth left in this solution have been stripped almost completely of their enamel in thirty minutes. The odor and taste of these preparations is decidedly acid, with vigorous effervescence when dropped into a soda solution, and analysis by competent chemists shows the three solutions purchased to contain lactic acid.

We all know the ravages, the havoc, brought about by lactic acid, produced in the mouth by the *bacillus lacti acidii*; and this in solutions of eight-tenths of one per cent.

We know the results of experiments with lactic acid by pioneer workers such as Miller, Black and Kirk.

We know the great amount of time and work which has been devoted to the enlightenment of the profession and of the public to the importance of oral hygiene by such workers as Fones, Stevenson, Hyatt and innumerable others.

We know that the crux of the whole problem with which we have been confronted is the preservation of the integrity of the enamel of the teeth; the preservation of the smooth polished surface of the enamel to inhibit the action of the bacteria by facilitating the removal of bacterial plaques.

The solutions examined etch the enamel surface and produce just this pernicious condition which we are working so hard to overcome.

Shall we, as a profession, remain indifferent to the sale of lactic acid to the profession as a secret preparation for the cleaning of teeth?

The answer lies with you. This is a matter which should receive the immediate attention of the dental profession and if there is no remedy in the Pure Food and Drug Law, steps should be taken to prevent the further exploitation of the public and the attendant devastating and injurious results to the health of the nation.

Kohinoors

By JOHN PHILIP ERWIN, D.D.S., Perkasié, Pa.

Let not your heart be troubled if you fail to bat 1000 in root canal work. The only one who never fails is the boob who never tries.

* * *

As a science, the practice of medicine is a fine art.

* * *

The devil deals his deadliest plight by leaving eyes and stealing sight.

* * *

Ask a child "How big?" and it places its tiny hands on top of its head. Ask a man the same question and he puts his paws on his purse.

* * *

Beware of they who saints would be. True worth is garbed in modesty.

* * *

Strange, but the more pains you take with your work, the less your patients will have.

* * *

AIL and FAIL, like subject and shadow, are forever inseparable. One is part of t'other.

* * *

Oh! for the brush of a Rembrandt to picture, the tongue of a Demosthenes to proclaim, the pen of a Kipling to present the vital importance of preventive dentistry.

* * *

You cannot spend Yesterday. Nor Tomorrow. Only Now.

* * *

No other word with Paradise rhymes quite so sweet as sacrifice. (Only it doesn't.)



Wide World Photo

Oral Hygiene Methods in Georgia

Atlanta, Ga., public schools are making a special effort to teach the children the care of the teeth. One of the visiting nurses is here shown with an immense brush and a mammoth denture demonstrating correct prophylaxis.



International Photo

America's Largest Dental Clinic

Here is what is said to be the largest dental clinic in America. It is operated by the dental department of Marquette University and is equipped with 152 chairs. Child patients and the poor are treated without charge.

Examine the Teeth of

Editorial Note



Dr. Louis Ottofy has a great many good ideas, and this proposition to have an examination made of the teeth of all the dentists in the United States—and I think we should include Canada, so that it would be all the teeth of ALL the dentists in America north of Mexico—would have a most surprising result.

You know there is a proverb somewhere about the "shoemaker's children," and I rather feel that if this survey is made the shoemaker will lose his caste and the proverb will be used entirely with regard to the dentist.

Anyhow, the idea is good, and if a sufficient number of the readers of this magazine are interested in the proposition the magazine will print at some stated time a perforated sheet attached to ORAL HYGIENE upon which each dentist can write the results of a survey of himself or of his neighbor, or both, and we will then give Dr. Ottofy a tabulating job that will keep him busy for some little time.

If you are interested, kindly write to ORAL HYGIENE and give your opinion.—R. P. M.

n of Dental Profession

BALTIMORE COLLEGE

By LOUIS OTTOFY, M.D., D.D.S., Manila, Tokyo, Chicago

DENTAL SURGERY.

TO FURTHER the cause of oral hygiene it is now essential to present to the public statements concerning the condition of the teeth of groups of industrials. Millions of teeth of children have been examined, and no further information can be gathered along that line.

I propose that an examination be made of the condition of the mouths of the 48,000 dentists in the United States, the results tabulated and made public.

This would have a decided impression on the public mind, for here we have a group of men whose teeth certainly ought to have had the necessary care, and should be in the best condition of any group of people in the country.

Such an examination would, of course, show an enormous amount of repair work, thus demonstrating the prevalence of decay, in spite of good care, and calling attention to the necessity for more than ordinary attention to the teeth.

After such an examination has been made, it could be extended to members of other professions, the various trades, etc., possibly even demonstrate the effect of various occupations on the prevalence of caries, as has already been done, to a limited extent with some occupations, such as workers in chemical factories, match factories, etc.

The task is simple with the dental profession :

A return postcard sent to every dentist, bearing a number, each dentist to report the condition of his mouth, giving age, and other data desired, either signing or not signing his name, and the information as to individuals to be confidential if so desired, although we see no reason why any dentist should object to this publicity, provided his teeth have been cared for, no matter how much dental work has been done in his mouth.

Col. Fisher first entered the Dental Corps as a contract dental surgeon in 1901, when the Dental Corps was first organized; served in the Department of the Lakes, with Headquarters at Fort Sheridan, Chicago, Ill.

He returned to civil practice in 1904, but never lost touch with the Army and was always counted one of the loyal and energetic supporters of the Dental Corps, assisting in all of the legislative campaigns which finally culminated in commissions being granted the members of the Dental Corps.

He was a Charter Member and the first President of the Association of Military Dental Surgeons; during the early years of the World War he was Editor of the *Journal of the Association of Military Dental Surgeons* and through the courtesies of the Surgeon General's Office was permitted to remain in that capacity while on duty during the World War.

He volunteered immediately the United States entered the World War and, in 1918, was commissioned a Major in the Dental Corps; he was discharged in 1919 with the rank of Lieut. Colonel, in the Dental Reserve Corps and a year ago was promoted to the full rank of Colonel.

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ORAL HYGIENE
BALTIMORE COLLEGE
—OF—
DENTAL SURGERY



Col. Wm. C. Fisher



From a Friend in Fiji

Editor ORAL HYGIENE:

Enclosed please find one of those we are all chasing after. It is numbered M64461965A and states on its face is that the U. S. will pay bearer \$1.00. (I leave that between you and U. S.) and that it is of Series 1917. I am giving this de-

scription so that if it should go wandering on its own account, you will know that I have done my best. I have been all this time trying for this \$1. I could get bigger ones, but not \$1.

I am sending ORAL HYGIENE the enclosed woodcut, also

so ~~DETERMINES~~ from the *Bulletin*,
 Sidney, Australia.

The picture I got from a lay nun. She was cook in the local convent, and French, like most of the sisters there. She gave it to me when she came to get a set of teeth made. I think there were some extractions first. It is over six years ago and she has died since. She was a veritable mountain of flesh. Sister Kinburga told me that

they tried to take the set of teeth out (I believe it was a complete set) before she died, but she told them that Dr. Russel had put in the set for her and that she wished it to remain there, so she has it with her in the grave. I am just wondering if she never took it out since I put it in.

My best wishes.

Yours sincerely

Henry W. Russel

Suva, Fiji

MY DENTIST.

My dentist is a hero cold

A placid man. What e'er the stress
 Of those his dreadful pincers hold

He shows no trace of nervousness.

In hours of blood and agony,

The pangs of probes and ligatures

His victims suffer he endures

With splendid equanimity.

The arrogance of kings is nought

To his. He opes your mouth four-square

As premises that he has bought,

And starts a horrid bonemill there,

The tend'rest springs, the kernels—all

Of your imperishable soul

He gathers in, and grinds the whole,

As grind the gods, infinite small.

He'll pluck the roots of keenest sense,

The while the Prince of Hell will sit

And feed the fires of hate intense

In an illimitable pit.

The which is you. And while you swerve

In moveless throes, and silent shrieks

Tear from your lips, he twists and tweaks

The vibrant centre of a nerve.

And while his gimlets gouge and wrest

Exploring all your being through,

He shares some comely little jest

With his attendant imp, and you

Insatiably crave to wet

In his hot blood your iron hands,

To kill his hireling where she stands

And hang the sign out: "HELL TO LET."

Experience

By R. L. T.

He opens the door and walks right in
And sets his grip on the floor—
Extends me a card with a foreign name
As he turns to close the door.

He asks if I have scrap for sale—
He pays the highest price;
I bring out the savings of two long years
As he sets his scales up nice.

He dumps in the scrap and puts on the weights
Till they balance—or nearly do
And I find what I thought was a hundred worth
Is nearly cut in two.

Then he makes me trade for his best alloy
And a box of his fine cement—
A gross of burs and as many stones—
And his smile is of deep content.

He closes his grip and says to me:
"I will call again next year."

I am looking now for that gentleman,
For the time is drawing near.

I was stung with his weights—I know it now—
His cement would never set—
His burs were crooked and would not cut—
I am out my hundred net.

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International Oral Hygiene

Translated and Briefed by C. W. BARTON, Fort Wayne, Ind.

Sweden

Victor Renström, in *Odontologisk Tidskrift*, advocates very strongly the practice of *preventive fillings*. He illustrates his plea for *extension for prevention* by a number of cases in which in a seemingly quite localized fissure, caries developed a short time after treatment into a penetrating proximal caries with eventual loss of the pulp. For the sake of pulp preservation, Renström insists, a method of *forethought* should be employed wherever indicated.

Czechoslovakia

At the Hygiene Exhibition held in Strasbourg on the occasion of the Pasteur Centenary, the Czechoslovakian exhibit, according to *La Semaine Dentaire*, is proof of the highly developed welfare organization in that country where the *physicians* lecture on the importance of oral hygiene, where the big industrial enterprises maintain dental services for their employees, and where the authorities do all in their power to promote better health by adequate dental prophylaxis.

Poland

The First Dental Congress in Lwow (Leopol), held in July, (see ORAL HYGIENE for September) seems to have been not only barren of results and progress, but of success even as a dental meeting. Only 200 dentists out of the 3,000 practicing in the Republic appeared at the convention. Friction between the representatives from the three parts of Poland was on the order of the day. According to the report by Dr. Kaplan in *Kronika Dentytyczna* of September, 1923,

the net result of the transactions of the convention is the rechristening of pyorrhea into *alveolitis chronica purulenta*, and the assertion by Prof. Baracza that actinomycosis has nothing to do with the teeth. Dr. Litwin read a paper on oral hygiene in relation to infectious diseases, while Dr. Ignatowiczowa reviewed the organization of dental school clinics. The scientific and social-hygienic development of dentistry in Poland is quite visibly impaired, for the time being, by discord, on an educational basis, between the dentists themselves, and by the heavy odds they are up against in their fight for recognition. The odds would not be so heavy if there were unity in the ranks.

The Polish dentists have agreed to make the utmost concessions in the dental treatment of government employees; the dental service in the army, however, is at present carried out only to the extent of 20 per cent. In the high schools dental service amounts to 67 per cent, in the State seminaries to only 59 per cent.

It is of interest to note that out of the 396 students enrolled in the State Dental College, 340 are women.

Argentina

Revista Odontologica of July, 1923, reports on the efforts of three school dentists, belonging to the Odontological Cercle of Argentina, to standardize the dental service in all the schools. It appears that at present school dental hygiene in Buenos Aires lacks co-ordination. The O. C. A. invited both the National Educational Council and the Ministry of Public Instruction to send the school dentists employed by them to the meeting

arranged by the Society. It seems, however, that the authorities ignored the invitation altogether, missing a good chance of increasing the efficiency of the service by unifying the now variegated efforts.

Brazil

In a very thorough investigation into the relation between calcium contents of the blood and lesions of the hard tissues of the teeth, Dr. Osvaldo Tiscornia comes to the conclusion that the extent of the latter stand in no certain relation to the former. One of the most interesting cases on which he reports presented extensive and generalized caries, hypoplasia of the enamel, retarded eruption, all together, yet the calcium index was far above the normal.

Uruguay

In the July, 1923, issue of *Revista Dental* (Montevideo), Prof. Jose Sanna examines the value of sugar as a food, and its contribution to the etiology of dental decay. The fact that children, and a good many adults, crave for sweets, does not mean that it is an indispensable item of nutrition; with the same logic one might call alcohol, tobacco, even morphine and cocaine, etc., indispensable for those who develop a craving for them. He concludes that sugar is by no means an indispensable food; it is responsible in some measure for the progress of dental decay, and, although there is no reason why sugar should be recommended as a food at all, it should be taken exclusively during the principal meals and before the fruit.*

England

According to a statement made in Manchester by the President of the Institute of Textile Industries, Mr. Emsley, the health of the workers has markedly improved, and the number of days of absence on account of illness considerably decreased, since

*The trouble with a lot of alleged investigators is that they get science and logic mixed up. —Editor ORAL HYGIENE

the textile factories are employing their own dentists—

We learn via the *Dental Journal* (Zurich), of a movement amongst the society women of Great Britain tending towards the elimination of candy and chocolates. This is a result of an address by H. J. Morris, president of the Yorkshire Dental Association, who denounced, at a recent meeting in Sheffield, sweets as just as harmful, if not more so, than alcohol.

France

P. E. Bousquet, in *La Semaine Dentaire*, lays particular stress on the importance of making *prosthetic* dentistry give way to the dentistry of the future, viz., *preventive dentistry*. The best way to do this, and the speediest, is to concentrate on children's dentistry. But here it is not so much the will to do it as the way to do it which really counts. Bousquet has seen and learned much in the United States, and he knows of no better way to treat children than the one adopted by the American specialists whose methods he illustrates. The education of the parents is the *conditio sine qua non* of success; he concludes that "each time one of us has won over, for the cause of oral hygiene, a mother or a future mother, he may have the satisfaction of having done his duty."

La Revue de Stomatologie of July, 1923, reports that the authorities have substituted the title *stomatologist* for the old one of *dentist*, in the regulations appertaining to the dental service in the hospitals of Paris.

Besides other more important changes in these regulations tending towards improving the dental service in the hospitals all round, the budget now grants much better pay to the dental officers; while the basal quota has amounted, up to now, to 10,000 francs, it has been increased to 21,000 francs per annum.

Clark's Chart, illustrating the theory of focal infection is being exhibited at the Pasteur Exhibition in Strasbourg by the Syndicate of Physicians

and Dental Surgeons of Alsace-Lorraine.

L. Cheinisse supports, in *La Presse Medicale*, Siffre's opposition to the Ferrier theory concerning the rôle of decalcification in tuberculosis in the origin and extension of dental caries. Siffre demonstrated that a mineral coefficient of less than 66 per cent does not predispose the teeth of the tubercular to decay, nor does an index superior to the average prevent caries. A history of cases of extensive caries in tuberculous mouths nearly always reveals the fact that other predisposing pathological phases in the patient's life must be held responsible for defects, especially in the enamel.

Spain

La Odontologia (Madrid) of July, 1923, contains part of a memorial written by Jesus Benloch, a teacher qualifying for the position of director of the new schools in Morocco, in which, after an able resume of the present state of school dental clinics in other countries, he insists on the necessity for the introduction of systematic dental inspection into all Spanish schools, advocated for years by Dr. Aguilar. The obligatory co-operation of the dentists with the medical inspectors has been ruled by royal decree of April, 1915; there remains, therefore, *only* its being put into operation. Benloch seems an exception: in Spain the teachers are not quite as eager to see this thing come about as are the dentists.

Belgium

On the occasion of the *Journées Medicales* organized in Brussels from June 24 to 27, Dr. Watry read a paper on *the dental peril*, in which he asked for the establishment of school dental clinics and inspections in collaboration with the medical profession and the public. He considers the present legislation as entirely inadequate, since it accords too much liberty to the quack who lives on the ignorance of the people which it is in his interest to foster. Change in legislation as well as propagation of sound ideas of dental hygiene amongst the public

are indispensable to countering the most fateful ravages of the dental peril as represented by the general neglect of oral hygiene.

Norway

The number of dentists in Norway at the end of 1920 was 595 for a population of 1,861,160, *i. e.*, one dentist for every 3,128 inhabitants.

Mexico

The II Mexican Odontological Congress will be held in Mexico City, from December 10th to 15th, 1923. An open invitation is tendered to all dentists the world over.

Section VIII of the eleven congressional sections is devoted to Oral Hygiene; a scientific and an industrial exhibition will be attached to the convention.

Information about details is to be had from the Secretary-General of the Mexican Dental Federation, Dr. José L. Galván, Av. F. I. Madero Núm. 69, Mexico City.

Italy

At the Royal Academy of Medicine in Naples, Prof. D'Alise reported on a case of bronchial asthma caused by an apical granuloma of the second right upper bicuspid, and completely cured by the removal of this cause, similar to two almost identical cases previously reported by Dr. Rueck of New York.

China

According to *La Odontologia Argentina* of March, 1923, quoting George Cecil, the Chinese dentist, who as a rule practices nothing but extractions, possesses quite generally one unique and only pair of forceps. Unless the useful instrument be incapacitated by an untoward accident in which the tooth remains victorious, it serves for decades, nay generations. It is reported that the other day somebody encountered at a Shanghai dentist's a pair of forceps with the year 1824 stamped on them as date of manufacture.

Read before the Homeopathic Medical Society of Pennsylvania, Johnstown, Pa., Sept. 18, 1923



THE maxillary sinus is the no-man's land between the Stomatologist and the Rhinologist.

The sinus may be infected from the nose and contiguous sinuses, from the blood stream, from retained secretions and from the teeth.

Probably fifty per cent of all empyemas of the maxillary sinus are due to oral conditions.

No other sinus is the victim of so many physiological changes.

In each antral area five temporary teeth develop, move through the tissues of the floor, and reach the normal positions in the mouth.

These in turn are followed by the development and movement into position of eight permanent teeth. After the eruption of the permanent teeth the sinus area develops into a sinus—this has a direct effect upon the tone of the voice.

Each antral floor having been physiologically punctured for the passage of thirteen teeth and, as time goes on, having been traumatized by the removal of five temporary teeth and often by the removal of one or more permanent teeth, it would be strange indeed if the floor of the an-

Maxillary Sinus

Due to Infection

Unfortunately, surgery and medicine of all varieties are suffering today from the ancient taint of Feudalism. There was a day when the Lord of the Manor bossed his domain with an iron fist and no one else dared enter. We have carried this attitude too

trum were not frequently the source of infection.

In addition to the traumatism of extraction, the floor of the antrum must sustain the impact of mastication—very commonly the roots of the upper bicuspid and molars invade the floor. Sometimes the upper third molars or wisdom teeth are partially or entirely found within the cavity of the antrum.

The walls of the sinus grow thinner with age, and with age there are a larger percentage of pyorrheal pockets and alveolar abscesses.

These alveolar abscesses occur from death of the tooth pulp from some cause. If the root apex extends into the antrum, sepsis from the dead pulp will invade the antrum. It is possible that root-canal therapy might obviate this—

Paranasal Sinusitis

Coming from the Mouth

By
Rea Proctor McGee,
D. D. S., M. D.
Colonel, D.O.R.C.

larger in the relationship of surgery and dentistry.

At last we are beginning to see that the welfare of the patient is greatly advanced and our own success is infinitely greater if we realize that the man across the border can turn defeat into victory.

in many cases it does, but those cases do not come under our observation. The cases we see and open are the septic ones.

Pyorrhea alveolaris, which is the accepted generic term for a series of infections of the supporting tissues of the teeth, is a very common source of antral infection.

The periodontal membrane which is periosteum on one side and pericementum on the other side is subject to the greatest pressure of any tissue in the body—consequently it is the victim of repeated trauma.

When the teeth are in perfect condition and in perfect occlusion a pressure of 250 pounds to the square inch can be exerted by the muscles of mastication.

If the bite is irregular—

fillings or crowns too high—teeth missing or the swing of the mandible abnormal—the hammering of one or two teeth may be many times 250 pounds to the square inch.

This condition, known as traumatic occlusion, pounds the periodontal membrane to a pulp—you all know how easily bruised tissue is infected.

In the Pasteur Institute in Paris, Besredka and Guldenberg have discovered in their study of pyorrhea that all known types of septic bacteria have been found in pyorrheal pockets, most commonly streptococcus, staphylococcus, pneumococcus and streptococcus haemolyticus.

These bacteria account for many of the ravages of pyorrhea but the investigations of these two pathologists resulted in the finding of another organism that explains why some forms of pyorrhea are localized and why other forms extend far into the surrounding bone, even perforating the antrum above and the inferior dental canal below. This organism is the bacillus perforans. When it is present in pyorrheal or apical infection it breaks down the thin septums of the bone cells so that infection can traverse areas that normally

would be extremely resistant to ordinary sepsis.

It is very probable that many empyemas of the antrum are due to a rapid extension of sepsis directly through the antral floor through the agency of the bacillus perforans in conjunction with other pathological organisms.

Another cause of infection is fracture of the floor in extraction. Sometimes, also, we may have a chronic periostitis of the anterior and lateral walls due to improperly fitted dental appliances which make undue pressure upon the mucoperiosteum.

It is also very probable that we occasionally have death of the dental pulp where the root apices are exposed in maxillary sinuses that are flooded with pus of origin other than dental. One thing is quite certain; the maxillary sinus is subject to infection from the nose and other sinuses, and the nose and other nasal accessory sinuses may in turn be infected from free pus in the antrum.

The most rational view of the treatment of maxillary empyema would therefore be an offensive and defensive alliance between the Rhinologist and the Stomatologist in the treatment of maxillary sinusitis.

I have reached the conclusion from long experience that those cases treated by one branch of the healing art should not be considered completed until they are carefully examined by the other branch. In the maxillary sinus the

Stomatologist must look after the floor of the cavity and the Rhinologist must see to it that the ethmoid, frontal and sphenoids are clear.

Let the primary operations be by the one whose domain is obviously at fault and the follow-up be assisted by the one whose area of work is a potential source of infection.

We know also that the maxillary sinus is imperfectly drained. Drainage alone in early cases will result in a cure. Many times a nasal puncture with irrigation will be satisfactory. Other times extraction of an offending tooth will be sufficient.

If the infection has lasted long enough to cause polypoid degeneration, there is only one treatment and that is free opening of the antrum, preferably through the canine fossa.

In long standing polypoid sinusitis I find it necessary to remove the polypoid tissue several times before the sinus will be cured. Irrigation is of great value when there are no polyps but it is only palliative in the presence of polyps.

Carcinoma and sarcoma of the antrum are not infrequent. I am quite convinced that chronic polypoid degeneration of this sinus leads to carcinoma unless radically and persistently treated by the surgeon in whose region it has its origin.

After operation the sinus should be packed for twenty-four hours with iodoform gauze and then irrigated with any non-irritant silver salt. When

polypoid degeneration is persistent or osteomyelitis is extensive, it is desirable to maintain a considerable opening through the region of operation for a reasonable period so that the sinus may be examined and freed from subsequent degeneration of tissue.

In acute cases, the sinus should be closed immediately.

The X-ray is our best non-operative aid in diagnosis. Trans-illumination is not to be depended upon as a final diagnosis. Aspiration is frequently of great assistance. The totality of symptoms will will out-weigh all other considerations.

In many cases of tooth infection the X-ray will show nothing because when the apex of the suspected tooth extends into the sinus there is nothing at the apex to rarify, consequently the X-ray picture has nothing to show. In those cases the high frequency test for pulp vitality is conclusive. This test is made by using the long narrow vacuum tube known as the urethral applicator. 10 to 25 milliamperes is usually sufficient.

Test teeth that are known to be vital, preferably incisors and cuspids; as the bicuspid and molar teeth are reached increase the current because the larger the tooth the greater the resistance. If, for instance, the left upper second molar is suspected and the current

gives normal sensation in the first molars, if the second molar does not respond to the same current, increase it ten milliamperes.

Then if there is no response touch with the applicator the right upper first molar, or if it is missing or obviously devitalized, the lower second molars should be tested. If these respond to the current the amperage should be again raised a little and the suspected tooth tested again. If there is no response it has a dead pulp.

I have used this method for some years with satisfactory results. Where the infection of the antrum is of dental origin all definitely positive sources of infection must be removed—this includes teeth, necrotic bone and periosteum that is hopelessly diseased.

In suturing the mouth wound I use chromocised catgut No. 0. This will last five or six days and removes itself.

For curettage I use two small sizes of Sim's sharp uterine curettes with copper shank. These may be easily bent to reach any part of the sinus. I usually send them to the instrument-maker and have three inches of the shank removed which makes the instrument easier to handle. In chronic cases I have had good results with the injection of one picquere of polyvalent, polyracial, pus vaccine every four days for one month.



What is the Oral Hygiene of Greater New York

By CHAS. J. BROPHY

A Member D.S., New York

Committee



EARLY last month at the request of the Health Speakers' Service, of the New York Tuberculosis Association I endeavored to give you some general information relative to the care of the teeth, in a talk broadcasted from this station.* I spoke as a representative of the Oral Hygiene Committee of Greater New York at that time, as I do today.

Today it is my desire to tell you something of the Committee itself—something of its personnel, of its aims and achievements.

No doubt many of you are wondering why such a committee is necessary. Some there are who think that we already have enough committees working in the field of "better health," and to them I would say that the developments in medicine in recent years have proved beyond the shadow of a doubt that a very close relation exists between the condition of the teeth of the individual and his general state of health.

*Station WEAJ, American Telephone & Telegraph Company.

This is an undisputed fact among most medical men and there is a growing tendency to insist upon proper mouth conditions as an aid in caring for the patient's physical welfare. This Committee is frequently called in consultation by those charged with the care of the City's health institutions.

Another reason, and a very good one, for the existence of this Committee, is found in the vast number of children attending the public schools of the city. Think of it, a million youngsters needing information that the dentist alone can give them! I doubt if many of you would come anywhere near guessing the number of school buildings New York City's school system requires. When I tell you that there are in the neighborhood of one thousand, you will agree with me that this alone offers a sufficient reason for the Committee's existence if no other field were to be considered.

A few preliminary remarks will enable you to understand more fully how completely this Committee represents the views and wishes of organized dentistry in the metropolitan

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Hygiene Committee New York?

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Committee

High Lights in Dr. Brophy's Article

Think of it, a million youngsters needing information that the dentist alone can give them.



The total number of dentists who are members of the societies represented on the Committee, is approximately four thousand, all of whom are in practice in the Greater City.



There are, in the Greater City, something more than sixty dental clinics of various sizes.

area. There are probably very few "listening in" this morning who realize how well dentistry has been organized in this country, though practically everyone marvels at the progress made in this science during even the past decade, in the matter of dental surgery, dental X-ray work, or radiography as it is known, dental restorative work, and in fact in all branches of the work.

This progress would not have been possible had it not been for the manner in which dentists all over the

country have gotten together in their local, state and national dental organizations. The American Dental Association today has over 35,000 members scattered over the entire country, with dental publications of its own which reach every one of its members, keeping them informed of everything new in dentistry, reporting all important dental developments so that each one of them may be familiar with the progress being made in dental research work. Practically all ethical and progressive dentists are

eligible for membership in this Association through affiliation with their local dental societies.

The various dental organizations in New York, of which there are half a dozen or more in the Greater City, were up to about five years ago working along more or less independently of each other, each trying in a small way to devote a certain amount of energy to spreading the gospel of oral hygiene among the public, occasionally giving a lecture or two in the schools in their particular section of the city. Anyone seeking information along the lines of preventive dentistry was unable to find an official body to confer with which would be recognized as the authoritative source of all dental information, and whose word would represent the views of the majority of the dentists of the city.

It was evident that some joint committee or body must be formed which would act in this capacity as many important dental questions were arising to be answered and solutions found for them, and that on this Committee, if it were to be effective, there must be representatives of all of the dental societies of the city. The outcome of this was the combining of the Oral Hygiene Committees of the various societies into one joint body to be known as the Oral Hygiene Committee of Greater New York, the various societies having from one to five representatives on the Com-

mittee, depending upon the numerical strength of the society from which they were delegated. The total number of dentists who are members of the societies represented on the Committee is approximately four thousand, all of whom are in practice in the Greater City.

It was in this manner that the Committee started to function nearly five years ago, its primary object being the dissemination of knowledge on the care of the teeth to all who desired it, and particularly to do all in its power to place the information in the hands of the school children, where it would be likely to produce the greatest amount of good. This was to be accomplished largely through a staff of volunteer lecturers who would regularly visit the schools of the City.

Another object was the encouragement of dental clinics wherein some of the reparative work could be done at a nominal cost to the child of little financial means—clinics which would aid in reducing the high percentage of dental defects—a percentage so high among the school children that it reaches alarming proportions, in some schools over 90 per cent of the permanent molars requiring attention.

With the information I have given to you relative to the number of school children, some idea may be gained of the futility of attempting to treat dental conditions or of even making an examination of the mouths. The latter

would require a very large staff of dentists properly to chart the conditions existing and to furnish each child with a copy of the chart. With no funds available excepting the few hundred dollars given each year by the dental societies, the Committee has had to devote its time to organizing a volunteer lecture staff from among its societies. These dentists are obliged to leave their offices, to go from one school to another to help the cause along, with the knowledge that they are contributing to a humanitarian cause as their only compensation.

How well the work is being done can be judged when I tell you that in the schools alone, during the period from February 1st to June 30th of this year, there have been about 175 talks given in the several boroughs, with an additional number given elsewhere than in the schools. This means that many thousands of youngsters have received first-hand information from the dentist that they otherwise would not have received.

The month of April was a particularly active one in this work when fifty dentists spoke to as many different assemblies of children in Manhattan and the Bronx, while a similar number were doing the same thing in Brooklyn. This was made possible by the spirit of co-operation shown by the New York Tuberculosis Association and the Red Cross Chapter in Brooklyn. Both organizations assisted by attending to

the mass of correspondence and bookkeeping required.

The lecturers have employed charts, models, stereopticon slides, moving picture films or other means to assist them in placing the message before the assembly in a manner that would appeal to the child's mind.

In addition to this lecture work in the schools, the Committee has conducted an interesting experiment in the Girls' High School in Brooklyn which has extended over a period of four years. Twice a year during that time a group of about twenty dentists has visited the school, and, by spending a half a day each time, they have examined and made charts of the existing dental conditions of each girl, making the charts in duplicate in order that one might be given to the pupil and the other retained by the Committee.

The object was to encourage prophylaxis and to acquaint the pupils with the conditions requiring attention in order that the same might be remedied. The second chart was to be used by the Committee for statistical purposes and to aid in checking up the conditions at a subsequent examination. It would be difficult to give you any idea of the result other than to say that this measure alone was productive of much good, the percentage of dental defects being reduced to a very marked degree by the simple expedient of calling the attention

of the child and the parent to the necessity for treatment.

The members of the Committee had the hearty co-operation of all connected with the school and particularly of Miss Wollaston who was in charge of the Physical Training Department. In this regard, I would like to read a letter which was received by Miss Wollaston from the president of the graduating class:

Dear Miss Wollaston:

It is my sincere pleasure to announce to you that our class on graduating wishes to leave behind it as a gift one hundred dollars for the Hygiene Department, to be used in maintaining the Dental Clinic in the school. We made this choice in spending our money because of the real gratitude we feel towards the Hygiene Department.

Undoubtedly it was your vigilance in keeping after our dental welfare that has helped us along the road to graduation for good teeth make good health, and good health makes good minds, and good minds make graduation possible. This is perhaps inelegant language, but it is plain fact. Besides this benefit we have gained another. You have succeeded in establishing in us a habit of regular dental attention. After knowing the pleasure of clean, healthy mouths for four years, we want them all the time.

With the help of our gift, may the good work be carried on.

(Signed) PRESIDENT OF CLASS.

There are, in the Greater City, something more than sixty dental clinics of various sizes; some with but a single chair and operator; others with many more than that number; some, as in the case of this High School, have either established a dental clinic or are doing so at this time as a result of this Committee's

work in these schools in conducting the examinations wherein the pupils may have their teeth cleaned by a dental hygienist who is qualified by her training to do this prophylactic work under dental supervision.

Some are maintained by private interests, others by colleges, hospitals, industrial organizations and health centers; likewise, about eighteen, in the public schools, are maintained by the City. Practically all of them seek the co-operation of the Oral Hygiene Committee in one way or another to aid them in solving problems arising from time to time. Many times during the year, the advisory committee of the Oral Hygiene Committee, is called in conference with the heads of these various clinics just as it is called in an advisory capacity by the Department of Education, Red Cross, Association for Improving the Condition of the Poor, the New York Tuberculosis Association, the National Association of Public Health Nurses, and many others.

These various clinics, while they are all doing excellent work, are totally inadequate to handle the thousands of dental cases presented. Many requests are received by the Committee from welfare organizations seeking to learn where dental services may be obtained for needy individuals, particularly for young children whose parents are unable to afford the cost of dental services. It is often difficult to refer them

to clinics where they may have their work done at a nominal charge, and at times little, if anything, can be done for them.

It would be a wonderful thing if this city had a few dental infirmaries similar to Eastman's Rochester Dental Dispensary, of Rochester, N. Y., or the Forsyth Dental Infirmary, of Boston, both of which are made possible by the generosity of the men whose names they bear, each capable of taking care of several hundred children of their respective cities each day, in buildings which are the last word in appointment and construction. Each of these institutions is devoted to the care of the mouths of the needy children in their cities, the very best of dental service being available to them under ideal conditions. Anyone visiting either of these institutions will be amazed at the completeness of their facilities for doing this work.

We of the Committee are looking forward hopefully to the time when an Eastman or a Forsyth may come forth in this city and erect a monument to his name by donating a dental infirmary to the cause, or, possibly, to an appropriation from the City which will permit of several centrally located clinics. It is hoped that the data being accumulated by it now will be sufficient to show up the deplorable conditions existing when over ninety per cent of our school children in some schools have

defective teeth. Many of these children are subnormal mentally and physically, due largely to this cause.

Think of what it would mean if we were able to take care of them and give them the chance that they deserve in life by keeping their mouths in a clean, healthy condition in one of these well equipped clinics, where the work would be done by dentists employed for the purpose and compensated for their time. It has been proved many times that the clinics wherein men volunteer to give a certain amount of their time gratis each day or week, are not successful as a rule. Both of the large clinics mentioned have a paid staff to operate them. It is impossible for dentists to spend the amount of time required for this work without remuneration, and the volunteer service generally fails after a short period.

Another field in which the Oral Hygiene Committee is working, is among the mothers' clubs and parents' organizations instructing them in the proper methods of preventive dentistry. Prospective mothers must also be given information relative to the value of various foods in building up the teeth of the baby. They must be taught that there are certain foods which contain elements required by the teeth if they are to be strong enough to carry on the function Nature intended they should.

The employer of today, realizing the importance of the

subject, is requesting speakers to appear before his employees and, aided by the stereopticon slides or moving pictures, to impart to them in a way that will appeal to the particular group, information relative to their teeth. So this year has seen requests from Y. M. C. A.'s, schools, clubs, training schools for nurses, teachers-parent organizations, employees of railroads, banks, factories, stores and insurance companies, as well as municipal, state and federal government employees, all seeking the assistance of the Oral Hygiene Committee in their effort to maintain proper mouth conditions as an aid to better health.

No request for dental talks has been refused; none will

be, as long as these volunteer dentists show the spirit they have shown thus far in giving of their time. The Committee knows that there will be plenty of enthusiasm for the work during the 1923-1924 school year. It hopes that every school will be reached with the number of lecturers now available. Letters addressed to Dr. Wallace T. Van Winkle, Secretary of the Oral Hygiene Committee of Greater New York, care of Station W. E. A. F., will receive prompt attention, as will requests addressed to the New York Tuberculosis Association Health Speakers' Service, 10 East 39th St., New York.

Coming:



"A Plea for the Return to a Natural Life."

Written for ORAL HYGIENE by Moses Joel Eisenberg, D. M. D., Fellow of the Harriet Newell Lowell Society for Dental Research of the Harvard University Dental School; Chief in Orthopedics at Forsyth Dental Infirmary for Children.



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Meeting of American Dental Laboratories Association

THE fourth meeting of the American Dental Laboratories Association, at Cleveland, September 11th and 12th, but the first at which a regular program of clinics and papers was given, proved to be a wonderful success; it was attended by representative laboratory men from most of the states in the Union.

The program was well received and all who attended were most hearty in their praise of the wonderful possibilities of the organization.

The officers, responsible for the preparation of the program and its presentation, were as follows:

Samuel G. Supplee, President, New York City, N. Y.; J. C. Schwartz, Vice President, St. Louis, Mo.; W. H. Schroll, Secretary, Chicago, Ill.; I. J. Dresch, Treasurer, Toledo, O.

Members of the council:

B. I. Martinez, St. Paul, Minn.; H. P. Boos, Minneapolis, Minn.; F. C. Miller, Detroit, Mich.; E. L. Mueller, Omaha, Neb.

The program adhered very closely to the object of the Association as set forth in the by-laws adopted the previous year, viz., "to promote and advance the science and art of mechanical dentistry, to co-operate with the dental profession, and to provide for the dissemination through the dental laboratories of knowledge concerning this subject, and to encourage the study of the various phases of this specialty."

Mr. Samuel G. Supplee, New York City, gave an illustrated paper on the "Desirable Requirements for Impressions, Bites, Measurements, etc., to Enable the Laboratories to Produce Better Results."

Dr. P. C. Lowery, Detroit, Mich., gave a very interesting talk on the "Selection and Arrangement of Teeth," covering color harmony and the application of the optical illusion in arrangement.

Dr. George Wood Clapp, New York City, gave a most instructive talk in his characteristic masterful way, on the subject of "Costs, Prices and Quality as Applied to Dental Laboratories."

Mr. Henry P. Boos, Minneapolis, Minn., presented a very valuable paper accompanied by a "chalk talk" and practical clinic, demonstrating the application of "Pontics with Porcelain Roots and Tips."

Dr. M. M. House, of Indianapolis, Ind., gave a wonderful talk on "The Commercial Dental Laboratory—Its Past, Present and Future." Being an ex-laboratory man, Doctor House was in a position to offer some excellent advice to members of the organization and layout, in a graphic way, the importance of the laboratory men getting together and collaborating with the dental profession, and emphasized the advisability of the dental profession being more liberal in recognizing good laboratory men who are conducting ethical businesses.

Mr. B. I. Martinez, St. Paul, Minn., gave a paper and practical demonstration of "How Doctor Monson's Spherical Principles Can Be Applied to Dental Laboratory Service."

Mr. E. L. Miller, Omaha, Neb., read a paper on "Laboratory Team Work" and "Relation of Dentists to the Laboratory."

Mr. I. J. Dresch, Toledo, O., gave a very practical "chalk talk" and paper on "Design and Construction of Cast Clasp," for tooth bearing and tissue bearing restorations, together with saddle area design for tissue-bearing partials.

Mr. W. H. Schroll, Chicago, Ill., gave an illustrated talk on "Financial Statistics and Statistical Reports, and Their Value to the Management."

Mr. J. C. Schwartz, St. Louis, Mo., presented a practical clinic on porcelain root tipped bridgework. Mr. Schwartz also presented a simple technic for constructing special gum blocks.

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SCIENCE is classified knowledge developed through orderly and impartial thought and when adapted to the study of prevention and cure of human ailments, respectful and dignified appreciation of its manifold doctrines will surely aid us in our endeavors.

The bruised world of today needs every possible constructive assistance and we, too, may do our share. No saprophytes are wanted: actions speak louder than words. In spite of the entwining octopus of commercialism, submerged in a sea of mechanical conception, the most promising outlook for American dentistry is an honest endeavor to emerge from the grasp of this alluring danger. Gravitation is the most common of all natural phenomenon and the dental fraternity in its evolution must either push upwards, or, like Newton's falling apple, move in a downward direction.

The writer thinks that it is not a mere delusion on his part to have in mind the seriously wrongful influence of the me-

chanical regime which has heretofore dominated our activities. We must make a decided effort to obtain the necessary change from this attitude.

Dentistry is both science and art. Its realm is not entirely science since it is practiced upon all varying and incessantly changing living tissues the very unlikeness of which, in different individuals, inhibits sameness and mathematical exactitude in duplicity of application. In other words our work may be *systematized* but never *standardized*.

On the other hand, art is not the only factor involved in dentistry since many of the latter's procedures require a knowledge and execution of the principles demonstrated in basic, immutable laws.

An absolute requirement for those desiring the advancement of truthful knowledge in any sphere is tolerance of thought. This open-mindedness must be calmed by a cold-blooded and conservative evaluation of whatever is presented for consideration. The fact that an idea has been carried out through the ages does not

*By Joseph H. Kauffman, D. D. S.,
New York, N. Y., Dental Department,
Bronx Hospital and Dispensary.*

CONCEPTS

in Dental Practice

prove its infallibility nor should a well-tempered procedure be attacked in order to furnish an excuse for a change. In either event, there is no final authority or ultimate truth since infinity of progress is concomitant with infinity of time.

The human body is the most highly specialized and detailed mechanism in existence. Potentially every such organism should be normal at least to itself, but, either through the influence of hereditary, environmental circumstances, or both, an individual may deviate from the so-called healthful state. Nature is our strongest guardian and, when Nature fails, man's efforts are at the most arbitrary and in the event of overpowering obstacles he cannot, of course, combat the inevitable.

The daily atmosphere of dentistry is a practical one. Our activities may be divided into two fields, generally speaking, preventive and curative. The basic thought of these two phases lies in the desire for a healthy oral cavity, structurally and functionally. In reference to this ideal, no two

bodies are alike and due to the unending diversification of Nature we are normal only to ourselves, although a common ground exists amongst all of the same species for comparative values and we call the result an average normal function or form.

The supreme task of the dentist should be to spread the gospel of oral hygiene.

Education of the public is a duty of the doctor—a teacher.

If the importance of mouth cleanliness is impressed upon the child the conception of prevention is installed at the psychological formative period. For those who have passed their schooldays, advice as to tooth conservation is usually appreciated and even the poorest and most ignorant have no excuse for the refusal of such information.

The spirit of prevention instilled by education is humanity's real hope for the future, particularly in respect to the preservation of a healthy mouth.

The fact that actual dental practice is usually manual in nature does not mean that it

is merely a matter of mechanics. Let us call it the application of mental effort and scientific thought accompanied by digital dexterity.

The dentist must be guided by his brain, fostered through experience and good judgment.

In the practice of dentistry, as in other branches of medicine, the scientific knowledge and discriminating art of comparative interpretation of both normal and abnormal human structures, function and disfunction, is termed diagnosis. Since this study centers about unfixed, varying and changeable organisms and their work, it can never be an exact one, although our efforts should aim to keep the empirical at a minimum and build up a rational and systematized code of diagnosis as a foundation for preventive and curative endeavors. A pressing requisite for adeptness in diagnosis is a knowledge of normal form and function; aberrations therefrom will of course be easier understood and the measures of correction more intelligently applied.

We must not only see a person with teeth. We must look through the very flesh as it were to envisage the inner sources of the body, and augment the value of our practical work by using the knowledge derived therefrom.

It is imperative to recognize the first deviation from the normal and use every conscientious effort to abort any further progress of even the most transient symptom. Then we

must maintain the regained healthful state.

In all of his work, the dentist must realize that the power of real success lies in correct diagnosis, irrespective of the field of dentistry involved or operation concerned.

Though dental caries is the most prevalent pathological condition encountered, we need not elaborate upon its place in practice, since that is self-evident. It is the soft tissues which demand some of the attention that might otherwise be diverted to cavities of decay or focused upon edentulous areas. A cavity of decay is commonly dealt with, but a diseased spot in the oral mucous membrane may require subtlety of diagnosis, ingenuity and intelligence of treatment.

The stronghold of the mouth lies in the oral mucosa and more definitely in the gums and their gingivae. Here are the vulnerable places for harmful invasion and it is at these particular tissues that we must stop to pause before applying our handiwork.

One either gets the sense of this or doesn't: there is no halfway.

To paraphrase: every dentist should be a gingival protector and his motto "respect healthy gums."

Those mutilating forms of dentistry which tear the gingivae, impede their circulation and rob them of every chance in the world, are well known. Even before he applies them, the dentist is cognizant of their probable effect: the real

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doctor will hesitate twice before transgressing once, thereby adding years perhaps to his patient's life and augmenting his own self-respect and satisfaction.

Many people would be far better off without any dental service whatsoever than to have their mouths ruined by a certain vicious type of so-called dentistry which, instead of making better, makes worse.

No matter to what extent economics may be involved in dental service, nothing should be done unless it will leave the mouth in at least as healthful a state as when first operated upon, if not in an improved condition. Irrespective of the fee involved, the patient's interests are always paramount;

but it is the writer's humble opinion that the conscientious dentist is perfectly within his rights when he declines to treat, or decides to discontinue services for, unappreciative and mercenary persons.

Dentistry of the future shall have to approach medicine more intimately and while preserving its own integrity as a distinct specialty, its influence will be enhanced if it assumes a broader atmosphere in the problem of public health.

The most difficult question, however, to be solved, is how to reach and teach the masses.

By serving many instead of a few, we shall hasten our steps in mounting the Dental Olympus.

Dr. Layton Will Send Them if You Pay Expressage

Editor ORAL HYGIENE:

I have a collection of ORAL HYGIENES several years back. I want to get rid of them for space room. Do you know if they would be of any use to anyone? Lots of good reading in them.

Yours,

Rob't. E. Layton, D.D.S.

3019 O Street
Washington, D. C.



Editorials

REA PROCTOR McGEE, D.D.S., M.D., *Editor*
212 Jenkins Building, Pittsburgh, Pennsylvania

The Editor welcomes manuscripts and will take best possible care of any submitted, but cannot be held responsible for them. Manuscripts should be accompanied by self-addressed stamped envelopes. Typewritten manuscripts are preferred and should be double-spaced and written on one side of the paper only.

Four Dollars

THE dues of the American Dental Association have been raised to four dollars per year. This was a step in the right direction, but not a long enough step. The value of the Association is so great and the calls upon it so strong that ten dollars a year would not be an excessive amount for each member to pay.

The House of Delegates is to be congratulated upon having voted unanimously for the present raise in dues and for its foresight in allotting one dollar per member to the Relief Fund Endowment. Nobody in the Association will offer any objection to paying the increase and it is reasonable to expect that in a very few years the justice of an even higher annual membership charge will be realized.

The four dollars dues are expended in this way:

Two dollars for general expenses of the Association and for the publication of the *Journal*. This is just as it has always been. The other two dollars are apportioned to dental research, dental education, dental library and dental relief, as follows: one-third research, one-third education, one-sixth library, and one-sixth relief.

On the basis of our present membership there will be twenty thousand dollars a year for dental research, more than twenty thousand dollars for dental education, something over ten thousand dollars for a dental library and a little more than ten thousand dollars for relief purposes in particularly deserving cases.


For the relief there is to be raised in the state in which the applicant resides an amount equal to that given by the national association. This will serve as a check upon any community making application for more help than is absolutely necessary.

It is also hoped that the increase of funds will allow the stationing of a full-time Director of Education in the office of the Association where all records pertaining to education in dental matters will be made available for those who require such information.

A great dental library has been needed for many years and it is now hoped the Association will see its way clear to found such an institution. From this library

the *Index of Periodical Dental Literature* can be made up.

Dr. Asgis Tenders His Resignation

HE *Journal of Oralogy*, which was published by the American Academy of Applied Dental Science under the editorship of Dr. Alfred Asgis has been discontinued and Dr. Asgis has resigned from the A. A. D. S.

Dr. Asgis states that there is not sufficient difference between their organization and the regular dental society to interest him and others, which goes to prove that it is very difficult to have a radical association remain radical because the radical ideas of today are frequently the conservative ideas of tomorrow.

This has also been the swan song of many political organizations.

A few years ago, for instance, the Populists caused the conservative citizens of America to sit up nights wondering what Jerry Simpson would do next. But if Jerry were to come back today he would have to be a lot more liberal in his opinions to even get a back seat among the conservatives.

Some Suggestions

THE American Medical Association realizes the value of distinctive publications. They have recently added to the general circulation among the members the *American Medical Association Bulletin*, which is the official journal of the House of Delegates. Formerly this *Bulletin* circulated among the members of the House of Delegates only. The *Bulletin* is not for scientific papers but is an open forum for general discussion and will occupy in the medical profession a position somewhat similar to ORAL HYGIENE in the dental profession.

In the explanatory editorial the statement is made "that polite and understandable English is all that is required, since the style and diction of the masters are not needed for an intelligent discussion between physicians of the subjects that should be discussed in the *Bulletin*."

This, you see, is very similar to the policy of ORAL HYGIENE in regard to contributions.

The article on the "Election of the President of the American Medical Association" by William Gerry Morgan of Washington, D. C. is presented in full because it so closely describes the needs of the American Dental Association in the same field.

There have been some who felt that

the editor of ORAL HYGIENE was a little too strong in his remarks about politics and politicians but rapidly there is coming to be a very considerable group in the A. D. A. who feel that it would be very difficult to make a statement in this regard too strong.

The article by Dr. Morgan is well worth reading and by substituting "Dental" for "Medical" we could very profitably adopt the suggestions in our own Association:

The American Medical Association has grown steadily in membership, in influence and in achievement until at the present time it is accorded the first place among medical societies of the world. This enviable position has been gained through the efforts of the loyal, hard-working, self-sacrificing men, who have always occupied the high offices of the Association. They have been almost without exception broad-minded, far-seeing men who have been ever ready to profit by constructive criticism, so far as it made for the advancement of the Association.

There comes a time, now and then, in every society, whether medical or otherwise, when some custom or method of procedure which has proved satisfactory in the past must give way to some newer custom or method better adapted to the present day needs of the organization. Such appears to be the case at the present time in regard to procedure in the nomination and election of the President of our Association.

For a long time it has appeared that there is far too much "politics" in the choice of the men who occupy the highest office within the gift of any medical association of the entire world. Many plans and suggestions have been and are being offered from time to time looking to the elimination of much of the political activity in our Association.

The President of the American Medical Association is occupied largely with the activities of the Scientific Assembly, since the business end and the administrative management is left in the hands of the House of Delegates, presided over by the Speaker. Therefore, it would appear that the Scientific Assembly should have a much greater voice in the selection of the President than has been the case heretofore.

The suggestion is made that the executive committees of the fifteen sections of the Scientific Assembly meet in joint session on the first day of each of the annual meetings of the Association, at such a time and place as seems most convenient to the members of the several committees. The Secretary

of the Association could, by correspondence prior to the meetings, arrange the details of such meetings. This joint committee should, at the annual meeting, discuss the available candidates for President and Vice-President, and select two candidates for each office, the names of whom should be written on separate slips and placed in separate envelopes, sealed, and given to the Speaker of the House of Delegates. These joint meetings of the executive committees should always be held in strictly executive session.

The speaker at the time of election should open successively each envelope and read to the House assembled the name on each slip, thus formally placing in nomination each candidate in turn, to be voted on at the appropriate time.

It would appear to be only fair to the prospective candidates that they be notified of their selection by the joint executive committee, and that each be permitted to make his own choice of the one who is to make the formal nominating speech.

The executive committee of each section is composed of the chairman and the last two retiring chairmen. Therefore, the members of the section would virtually be selecting the candidates for the offices of president and vice-president of the Association to be voted on by the House of Delegates.

Some such plan should be put in operation, or at least determined on at the forthcoming session, which will be held next year in Chicago. These suggestions are offered at this time in order that ample opportunity may be given for free discussion of the subject by the rank and file of the profession.

Help Russia



At the meeting in Cleveland Dr. Florestan Aguilar, of Madrid, Spain, General Secretary of the International Dental Federation, referred to a visit he made to Russia for the purpose of investigating the conditions and circumstances of Russian dentists.

He found they were in great need of dental instruments and supplies with which to practice their profession and which would enable them to earn a livelihood. The condition of professional men in Russia, he said, was much worse than

that of the laboring classes. He read letters from prominent Russian dentists appealing for relief, and said the distress and privations of dentists in that country generally were heart-rending. Dr. Aguilar made an earnest appeal to the members of the American Dental Association to help their colleagues in Russia in whatever way they could.

This movement is of the greatest importance. Never before have we, as a profession, been called upon to help, *en masse*, our contemporaries in another country.

Whether or not we have the slightest sympathy with the Russian revolution, we know that the dentists of Russia are certainly not profiting by the revolution and we should be willing to do whatever we can to help them get a fresh start in the world, now that they will be allowed to own a few necessary articles.

We always think of Russia as being covered with snow, and at this particular period, in December, we can do a part of our Christmas giving by donations to the fund for instruments for Russian dentists.

Before you forget it, write a check for as much as you can spare and mail it in to Dr. Otto U. King, Secretary American Dental Association, 5 North Wabash Avenue, Chicago, Illinois.

She Doesn't Like Us!



MRS. POINDEXTER, who writes for the Philadelphia *Public Ledger*, has a very poor opinion of dentists. It seems that the lady's claim to fame rests upon the fact that she married a Mr. Miles Poindexter, who was, at one time, a United States Senator, but with her help was unable to secure a sufficient number of votes to be returned to that very desirable job.

He was then sent as a Minister to Peru, and, unfortunately, seems to have gone alone.

Mrs. Poindexter also has many disagreeable things to say about the Military Service of the United States; in fact, she makes so many wild statements that it might be a good thing for the State Department to call her attention to the fact that the Diplomatic Service is presumed to be diplomatic.

Lengthening the Course



FOUR years is long enough for any course. If the student can't get it in that time, let him spend six or eight years on the job individually. If the teachers can't teach dentistry in four years, something is wrong with them.

This constant extension of the course

simply means that one of these days the limit will be reached and out of the wreckage the remnant that is left of dentistry will combine with medicine.

Five years is the time required under the new regulations—soon it will be six. Of course, if some way could be found to lengthen life, we might spend twenty years in preparation. Some of us have already spent twenty years studying dentistry and we don't know it all and that includes everybody.

One thing is very certain—the limit of time for a dental education has been reached.

The next step is to eliminate useless courses and improve the necessary ones.



Pedodontia

By PHILIP R. THOMAS, D.D.S., Minneapolis, Minn.
Contributing Editor

THE early diagnosis of incipient mal-occlusion should be of great interest to all practicing dentists. Such a diagnosis is of great value to the patient and greatly appreciated by parents.

The treatment of orthodontic conditions at an early age has been a subject of much dissension and discussion in orthodontic literature.

The late Dr. Case took a very decided stand in the matter, but the writer is not in agreement with the idea of late orthodontic treatment. On account of the authoritative position of Dr. Case, one takes the opposite view with temerity.

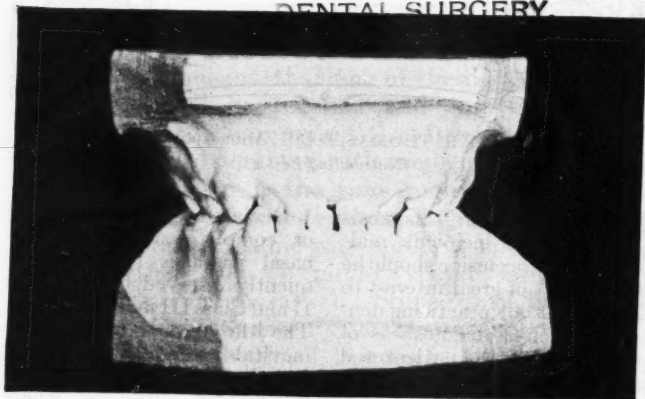
However, from experience and clinical observation of many deciduous mouths, it would appear that early treatment is positively indicated as a health measure. It is admitted by all that normal function is a pre-requisite in the development of normal arches. Not the arches alone are affected by lack of normality of function. The development of the nasal passages is, to a large degree, determined by the normal development of the superior maxillae.

Deviated septae with partial or complete stenosis of the nasal passages is not infrequently observed, both in Class II and Class III mal-occlusions. The throat and bronchi are inevitably affected and are less resistive to infection and inflammatory processes where there is lack of proper development of the air passages.

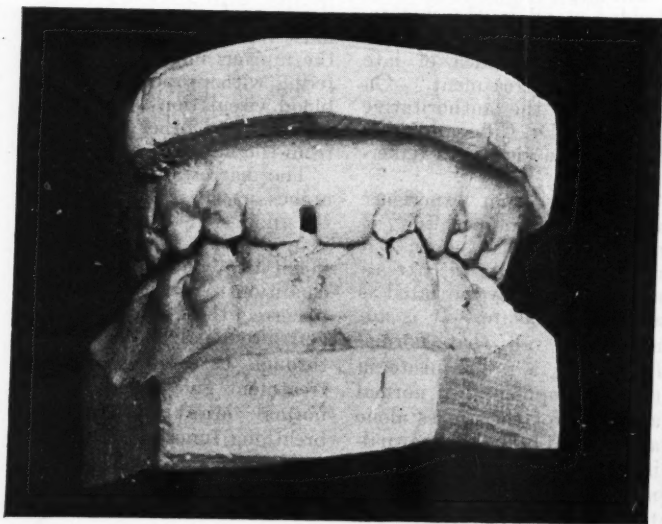
The passage of air assists in maintaining equilibrium of blood circulation and a constriction of air passage space must increase air pressure on the mucous membranes interfering with proper balance of blood circulation resulting in Rhinitis and other deviations from the normal.

The narrow, high palatal arches in Class II cases, and the undeveloped superior maxillae in Class III cases must inevitably contribute to such conditions. Shall we then wait to correct these factors in nasal and bronchial ill health, or through early diagnosis and treatment give the child both normal masticatory and breathing function?

These cases, Class II and III, in early infancy are easy to correct with small arches and inclined planes, placing the parts in such relation as to



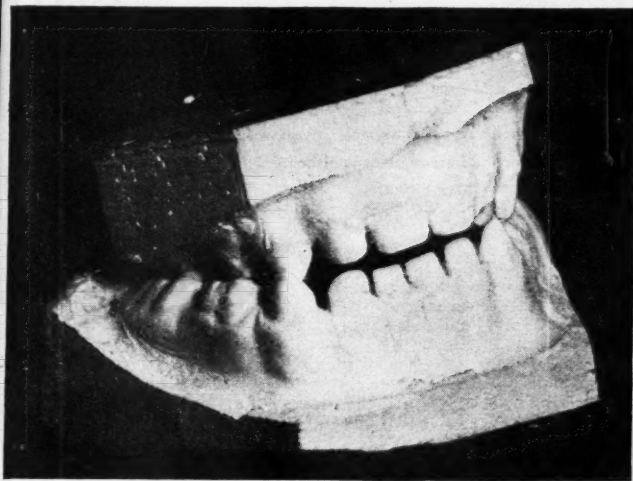
I. Class III, Mal-Occlusion; age 2 years and 6 months.



II. Class I. Patient 5 years and 3 months old. Lack of arch development.

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III. Unilateral linguo version. Patient 2 years and 9 months old.

restore normal function before the appearance of the permanent teeth. Not only is this true, but the restoration of normal function resulting in growth of mandible and maxilla provides osseous space for the development of the crowns of the permanent teeth in normal position.

If normal function is a requisite in normal develop-

ment then why let incipient mal-occlusions progress to the stage of a deformity before orthodontic treatment is instituted?

Knowing the results of lack of treatment, would you allow your own child to grow to an adolescent age with the conditions shown in the accompanying illustrations?

(To be Continued)

1923 Annual Index to ORAL HYGIENE

We are now printing a limited number of copies of the Annual Index to the 1923 volume of ORAL HYGIENE; these are for gratis distribution.

The Annual Index carries a title page and is adapted for binding with copies of ORAL HYGIENE itself.

Requests for the Index should be addressed to ORAL HYGIENE, Publication Office, Imperial Power Building, Pittsburgh, Pa., rather than to the Editor's Office.

Laffodontia

If you have a story that appeals to you as funny, send it in to the editor. He may print it—but he won't send it back.

"I wisht I was a little rock
A settin' on a hill;
A doin' nothin' all day long
But jest a settin' still.
I wouldn't eat, I wouldn't drink,
I wouldn't even wash,
I'd set and set a thousand years,
And rest myself, by gosh!"

HE: "This storm will probably
put out the lights. Are you afraid?"
SHE: "Not if you take that pipe
out of your mouth."

BOY: "I suppose you dance?"
GIRL: "Yes, I love to."
BOY: "Well, then let's love."

RHODA: "I asked Kitty what she
was going to wear at the dance."
ROSALIE: "What did she say?"
RHODA: "Oh, nothing much."

"It's hard," said the sentimental
landlady at the dinner table, "to
think that this poor little lamb
should be destroyed in its youth
just to satisfy our appetites."
"Yes," replied the smart boarder,
struggling with his portion, "it is
tough."

"Your new partner's a terrible
dancer, Rosalie."
"I know—but, oh, boy, how he
can sit out!"

While the wedding ceremony was
going on, a baby of one of the wed-
ding guests cried incessantly.
"Wasn't that crying terrible," ex-
claimed the maid of honor. "When
I get married I'm going to have ch-
graved on my invitation, 'No babies
expected.'"

"John," said the commuter's wife
"what train does Mr. Lawnmower
take to town?"

"He takes the one after mine."
"If he takes the train after yours,
how do you know what train he
takes?"

"Because that's the one I take."

Aunt Jinny, a Carolina Negress,
was a great advocate of the rod as
a help in child-rearing. As a result
of an unmerciful beating which she
gave her youngest and "orneriest,"
she was brought into court one day
by outraged neighbors.

The judge, after giving her a se-
vere lecture, asked if she had any-
thing to say.

"Jest one thing, jedge," she re-
plied. "I wants to ax you a ques-
tion. Was you ever the parent of
a puffectly wuthless cullud chile?"

TEACHER: "Who signed the
Magna Charta?"

YOUNGSTER: "Please, ma'am, it
wasn't me."

TEACHER (disgusted): "Oh, take
your seat."

SKEPTICAL MEMBER OF RURAL
SCHOOL BOARD: "Here, call that
boy back. I don't like his manner.
I believe he did do it."

On a farm in South Georgia is
posted this sign:

"Trespaser's will be persekuted
to the full extent of 2 mean mon-
gral dorgs which ain't never been
ovarly soshibil with strangers and
1 dubbel barelt shot-gun which ain't
loaded with no sofy pillers. Dam,
if I ain't tired of this hel raisin on
my proputy,"

HALITOSIS

AS DEFINED IN THE CENTURY DICTIONARY

(Hal-i-to-sis) N. N. L.

(L Halitus—Breath . . . Osis—Offensive)

Offensive breath, whether arising from diseased or neglected conditions of the teeth, mouth or nose or caused by disorders of digestion, respiration, the excessive use of tobacco, etc., may be readily overcome by the deodorizing properties of—

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Listerine is strictly antizymotic, it inhibits alike the acid fermentation of carbohydrates and the alkaline putrefactive processes of mixtures of meat and saliva, retained as debris about the teeth; hence, Listerine is antagonistic to the activating enzymes of fermentation so often the cause of Halitosis.

Many dental practitioners who advise their patients to use Listerine daily as a mouth-wash, also keep Listerine in an atomizer on the dental bracket readily available for use prior to operations, in self defense against pronounced cases of Halitosis.

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Point 12—A SUMMARY

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(And, that's all for this year.)

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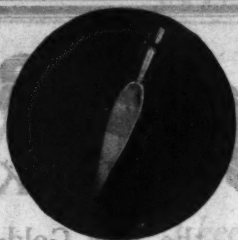
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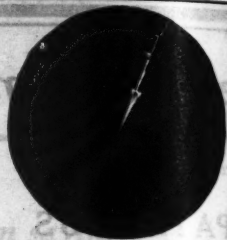
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Years ago nothing was done to relieve post-operative pain or pre-operative excitement. The patient was expected to suffer.

Today it is the dentist who does good work as painlessly as possible, that receives the praise and recommendations from his patients that maintain and increase his clientele.



ORAPAIN, although recently introduced to the profession, is now being used by thousands of dentists to relieve post-operative pain and to control nervous excitement. It gives quick relief, and is harmless to the system. The cost per patient is trifling.

ORAPAIN is packaged 100 tablets to a bottle and with each bottle we give you FREE twenty dispensing envelopes for your convenience. Price per bottle \$1.00. Order a bottle from your supply house today, or send coupon to us for sample.

G. D. SEARLE & COMPANY

4618 Ravenswood Ave.

Chicago, Ill.

Check, Sign and Mail this Coupon

**G. D. Searle & Co.,
4618 Ravenswood Ave.,
Chicago, Illinois**

Send me the following as checked—

- ☐ Bottle of 100 ORAPAIN Tablets
☐ Free Sample of ORAPAIN Tablets

Name.....

Address.....

City..... State.....

Dealer.....



SOLOS

Moisture-proof
Paper
Receptacle

*for surgical
waste*

A splendid device which is in use in many operating rooms. It is economical, sanitary, easily adjusted. Bags measure 10½ inches by 20 inches and either frame.

When the bag is full, simply remove and destroy it. This eliminates washing of soiled pails.

Enquire of your dealer or write to

SOLOS SANITARY CO.

45 East 23rd St., New York

PROCO

LOCAL
ANAESTHETIC

Acts Quickly

In use by dentists for more than 15 years.

It is non-irritating, non-toxic, non-aloughing and has no after-effects.

Try It At Our Risk

We will send you a four-ounce bottle. Use as much as you need to determine its value. If it is 100 per cent satisfactory, pay us \$1.00.

If not—just return the unused portion. No charge.

Write us for your bottle, mentioning your dealer's name.

Proco Chemical Co.

50 East 125th Street
New York, N. Y.

EXODONTIA COURSE

for PRACTITIONERS

DEMONSTRATING Nitrous Oxide and Oxygen and Nerve Blocking Anesthesia.

TECHNIC: General Extractions; Removal of Impacted Teeth; Surgery of the Alveolar Processes; Post Operative Treatment, etc., X-Ray Interpretation

BEGINNING week February 4th, 1924.

Write for particulars and application blanks to

J. P. HENAHAN, D. D. S., 1023 Rose Building, Cleveland, Ohio
Please send information regarding course in Exodontia to

Name

Address

I am a graduate of Dental College—Year

Member of Dental Society

We are not quite ready to tell you about the
* and what it will do for
 the busy dentist, but confidently expect to be
 able to tell the big story in the January issue
 of Oral Hygiene.

*This adds to the mystery to which reference was made
 on page 1763 of the November issue of Oral Hygiene.



The Curtain
will soon be
Gin *lifted* **plex**
Sal *and*
cotto *lder*



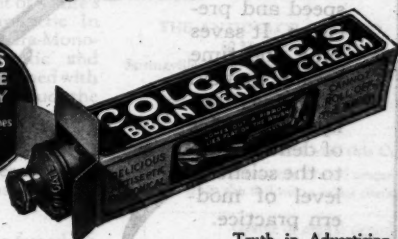


The Question that occurs to professional men... Since it is the consensus of professional opinion that a dentifrice for general use is valuable only as a cleansing agent, and that medicated dentifrices deserve no place in rational oral hygiene, why should I recommend Colgate's Ribbon Dental Cream?

The Answer that instantly comes to mind... Because its cleansing power is not surpassed by any safe dentifrice; because it does not contain ingredients hurtful to hard or soft tissues; because it claims to be nothing more than a safe, efficient cleanser.

Sound judgment and good taste beget that respect which prompts representative professional men to advise the use of Colgate's Ribbon Dental Cream.

generous supply of samples will be sent postpaid to professional friends on request.



DENTAL DEPT.
COLGATE & CO.
Established 1806

99 Fulton St., New York

Truth in Advertising
Implies Honesty in
Manufacture



The Perfection of Cook Carpule System of Hypodermic Medication *A Distinct Advance in Oral Surgery*

The many benefits of local anesthesia have always been handicapped for the dental practitioner by the numerous imperfections in both the old-fashioned style of hypodermic syringe and the form in which the medication was presented.

Perhaps hundreds of types of hypodermic syringes have been offered to dentists, all of them just some modification or other of the old muzzle-loading, antique instrument that was used by the first man who ever gave an injection of cocaine.

But at last a real improvement has arrived. This improvement is a scientific evolution that perfects the whole system of hypodermic medication and presents in one entity both the instrument and the medication as an

INSTRUMENT OF PRECISION

This is the Cook Carpule Hypodermic Syringe. The Carpule System solves the physiological, chemical, bacterial and mechanical problems of hypodermic medication.

It makes the hypodermic injection a thing of accuracy, convenience, speed and precision. It saves time, and time means money. It brings the hypodermatics of dentistry up to the scientific level of modern practice.



SPECIAL PRICES FOR QUANTITY ORDERS

Box of 100 Carpules.....	\$ 8.50
Five boxes, each 100 Car...	37.50
Ten boxes, each 100 Car...	70.50

Cook Laboratories, Inc.

O. H. 536 Lake Shore Drive

Chicago, Ill.

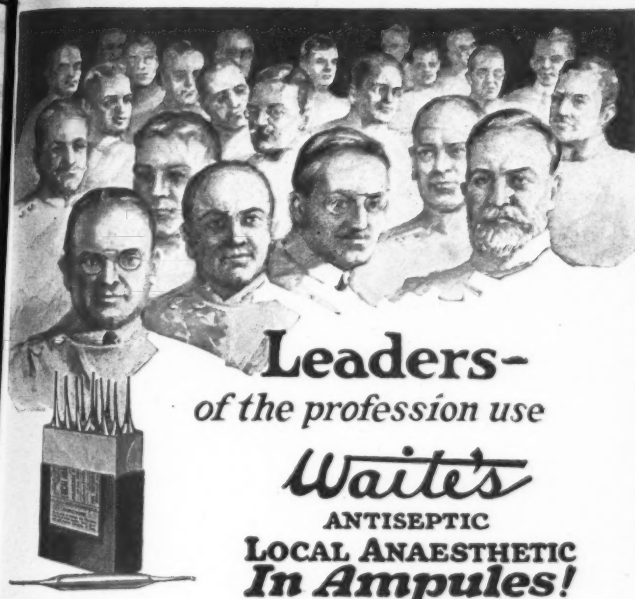
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DERS
\$ 8.50
37.50
70.50



**Leaders-
of the profession use**

Waite's
ANTISEPTIC
LOCAL ANAESTHETIC
In Ampules!

MEMBERS of the profession who want an anaesthetic that is more powerful and healing than ordinary procaine solutions in ampules use Waite's Antiseptic Local Anaesthetic in Ampules.

The principle ingredient of Waite's Antiseptic Local Anaesthetic In Ampules is Ortho-and-Para-Monodo-Phenol, an antiseptic and anaesthetic, which is combined with procaine or cocaine to produce the most positive and lasting local anaesthetic known to the profession. Its antiseptic properties make it a rapid healer of tissue and prevents after pains and soreness.

"Waite's" has long been famed for producing perfect, positive, lasting, non-toxic anaesthesia. Used in millions of cases for over thirty years, it has proven safe every time.

*Waite's Anaesthetic is also
sold in bottles.*

Sample Box of Ampules FREE

on receipt of your professional card or letterhead. Mail the coupon.

Nerve Blocking book FREE

will quickly make you a master of this new and profitable science without private lessons or a post graduate course. See offer on coupon.

THE ANTIDOLOR MFG. CO.

80 Main Street

Springville, Erie County, N. Y., U. S. A.

Branches:

Fort Erie, Ont.: Paris, France

Check, Sign and Mail this Coupon

- ☐ Send me sample box of ampules, free.
- ☐ Ship the following order through

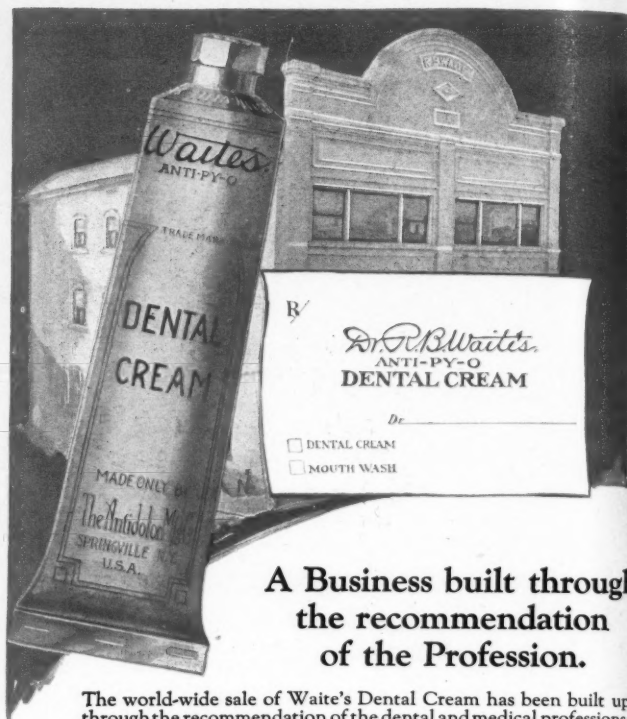
(Name of dental depot)

and mail me Waite's Nerve Blocking Book FREE with any of the following offers:

- ☐ 12 ounces or ☐ 12 boxes 1½cc Ampules of Waite's Local Anaesthetic, \$8.40.
- ☐ 12 boxes 2½cc or ☐ 12 boxes 3cc Ampules \$10.20.
- ☐ Waite's Complete Nerve Blocking Outfit for making all injections. Value \$13.60, ail for \$12.00.

Name.....

Address.....



R/

Dr. R. B. Waite's
ANTI-PY-O
DENTAL CREAM

De _____

☐ DENTAL CREAM

☐ MOUTH WASH

A Business built through the recommendation of the Profession.

The world-wide sale of Waite's Dental Cream has been built up through the recommendation of the dental and medical professions, because it does everything they believe a dentifrice should do.

Its base of mild, edible oil soap emulsifies the film; cleans and polishes the teeth and removes stain without scratching the enamel. It contains no harsh grit.

Its pleasant tangy mouth-watering taste increases the flow of the saliva while its alkalinity temporarily adds to the alkalinity of the saliva. In these ways it assists

nature in her work of protecting the teeth and preventing decay.

THE ANTIDOLOR MFG. CO.

80 Main Street

Springville, Erie County, N. Y., U. S. A.

Branches: Fort Erie, Ont., Paris, France

Full Size Tube FREE!

Waite's
ANTI-PY-O
DENTAL CREAM

SIGN AND MAIL THIS COUPON

Enclose Professional Card or Stationery

THE ANTIDOLOR MFG. CO.,
Springville, Erie Co., N.Y., U. S. A.

I desire to make my own tests and comparisons of Waite's Anti-py-o Dental Cream. Please send me large tube free.

Name

Address

Send for full size tube for your own personal use to-day. Convince yourself that it is the kind of dentifrice you want your patients to use.

Mail the coupon and make your own comparisons

Closeups of Patients—No. 12



Merry X'mas— We've a Christmas package of Lily Cups for you. We'll send it free on receipt of your card and the name of dental supply house.

PUBLIC SERVICE CUP COMPANY

Bush Terminal No. 20

Brooklyn, N. Y.

Serve in a



LILY



Why

Why use pumice and things for prophylaxis—an abrasive agent, a polishing agent and an antiseptic—when these three essentials are *united* in Prophylax-O Tablets (Gardner).

This unit form speeds up the prophylactic operation—enables you to do better work in less time than is possible under the old-time mussy, messy methods.

So, *why* not?

And here's the coupon that brings free samples.

Ellis-Jones Drug Co., Memphis, Tenn.
Please send free samples of Prophylax-O Tablets (Gardner)

Dr

Address

Dealer

B-D PRODUCTS

Made for the Profession

LUER-LOK POSNER SYRINGE

FOR LOCAL ANAESTHESIA

THE 3cc LUER SYRINGE WITH THE
NEW NEEDLE LOCKING DEVICE
WHICH INSURES OPERATOR AGAINST
LOSS OF NEEDLE OR LEAKAGE.

A Compact Removable Finger Rest

FLAME THE NEEDLE
BOIL THE SYRINGE
FOR
PERFECT STERILIZATION



WE RECOMMEND

PLATINUM-IRIDIUM NEEDLES

25 Gauge 1 Inch FOR INFILTRATION

22 Gauge 1½ Inch FOR MANDIBULAR

INFRAORBITAL AND TUBerosITY INJECTIONS

22 GAUGE NEEDLE SUPPLIED WITH MOVABLE GUARD
WITHOUT EXTRA CHARGE

Send For Informative Literature On

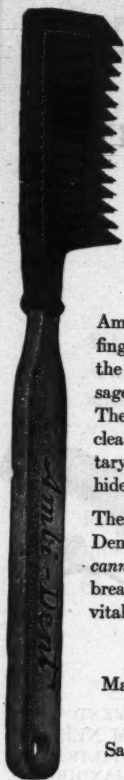
"LOCAL ANAESTHESIA AND TECHNIQUE" By JOHN J. POSNER, D.D.S.

ORDER FROM YOUR DEALER

BECTON, DICKINSON & Co.

RUTHERFORD, N. J.

Makers of Luer Dental Syringes, Asepto Dental Syringes, B-D
Water Syringes and Security Dental Needles.



**Not just
a Tooth
Brush But
a Gum
Brush too!**

Ambi-Dent's rubber finger-bristles clean the teeth and massage the gums, too. The rubber bristles clean—and are sanitary. Germs cannot hide in this brush.

Then too, Ambi-Dent's rubber bristles cannot come out or break off. This is a vital advantage.

Massages—cleans
polishes

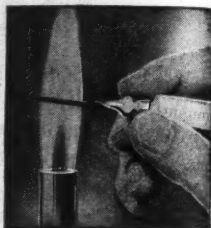
Sample brushes:
3 for \$1

Ask your druggist to stock them

**AMERICAN
TOOTH BRUSH
COMPANY
St. Marys, Pa.**

**AMBI-
DENT**
DR. H. B. MARSH

**Can You
Do This?**



Can you hold in the flame of your Bunsen Burner the Hypodermic Needles you are using?

If parts are soldered, you can't, which means that you are denied the quick, easy and sure method of sterilization.

**A. P. W.
Needles**

are 30% Iridium and 70% Platinum and are not soldered, therefore you can sterilize them in the hottest flame with perfect safety.

Ask your dealer

American Platinum Works,
N.J.R.R. Ave., at Oliver St.,
Newark, N. J.

Salter's Pure Silk *Waxed* "Tape" Dental Floss

For Prophylactic and Pyorrhea Work



All Tape Dental Flosses made in five standard widths.

Style No. 304—as illustrated, contains one-ounce Waxed Tape in Dome.

Style No. 306—same as above, also put up without the Dome, Wrapped in Waxed Paper.

Style No. 302—Put up in $\frac{1}{4}$ Ounce Glass Vials.

Style No. 300—Put up in $\frac{1}{8}$ Ounce Glass Vials.

Because of convenience in size Styles No. 300 and No. 302 are recommended for Patient's use.

THE DENTISTS FAVORITE

Style No. 226—illustrated contains 150 yards of perfect Round Dental Floss, Uniform in Size and Waxing. Has metal Cap, with Outlet and Cut-off. An air-tight container, which keeps the floss clean and sterile.

Sample Card of Sizes, and Illustrated Catalogue, showing our different styles of put-up, will be furnished on request.

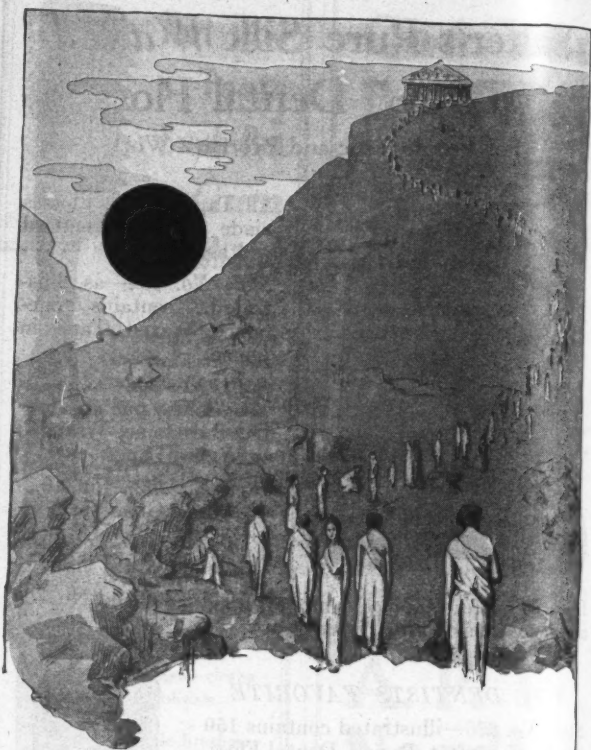


Manufactured by

BELDING BROS. & COMPANY

Chicago, Ill.

Boston, Mass.



In The Days of The Gods

When system is carried too far it degenerates into "red tape." That's what was wrong with the mythological gods. The gods were just one big family and behaved true to form. To keep them good-natured was man's principal task and occupied most of his waking hours.

If you had practiced dentistry then, when your gold and ivory came in little ships or pig-a-back, you would have begun each case with an offering to Neptune and his immediate connections. You would have tipped Vulcan, remembered wife Venus, and given Dan Cupid a lollypop to keep out of the operating room. Also you would have slipped a gift to Mercury, a sack of rolled oats to Ceres, and taken two days off to remember all the godlets you had forgotten.

Then, when your regular Christmas list was complete, it would be a safe bet that some walnut-skinned begger would slide into your office to give you a peep at a clay thing he called "Osiris" who would let you in all over again for the Egyptian branch of the family. All together your life would have been one long traipse from temple to temple, when a little real system would have enabled you to "fix" Jupiter and let him fix the others.

Red tape killed the gods. In the end men saw the foolishness of it. Osiris was put into a glass case and Neptune became Davy Jones; but wasteful habits remained. Now dentists do not curry favor in temples, but many of them join the procession from depot to depot, clasping a plaster-cast in one hand and their patience in the other, seeking suitable porcelain crowns from out a mass of helter-skelter, hodge-podge teeth, when they could have at their elbow a scientific crown system in graded sizes with enough porcelain for proper adaptation.

If you are one of those still making offerings of time and trouble, then before your profits join Osiris in the curio case ask your dealer to tell you about the Trubyte system and show you

TRUBYTE CROWNS

THE DENTISTS' SUPPLY CO.

NEW YORK

He never leaves his patients “guessing”

—This dentist in Fairfield, Me.
tells 'em—But read his letter—

IF you really want to know why I use your Copper Cement, I see no reason why I should not ease you “suspense,” for I do not like to leave even my patients guessing.

And that, by the way, is my first reason just why I use Smith's Copper.

I tell 'em—“Here is a filling that will not discolor; is hard enough to stand up to all the strain of mastication; is germicidal and arrests marginal decay better than any metal filling; and—well, what more could you ask for?”

It GOES, and my patient is satisfied that all men are not liars.



—and it is the only Copper Cement that may be used for setting crowns and bridges.

Ask your dealer

LEE S. SMITH & SON MFG. CO.
PITTSBURGH, U. S. A.



**The Famous
Red Package—
familiar for more
than 30 Years—
but notice THIS**



Made in the procaine form too you see!
Cocaine if you want it though. Sample free
of the procaine form—no narcotic blank.
There's lots of space here for your name and
address—or just send your professional card
or letterhead.

**HISEY DENTAL MFG. CO.
ST. LOUIS, MO.**

Write
for literature on the
NEW KIDDER
Sectional Impression
TRAYS.

for full mouth impressions or ask your
dealer for these new trays.

6 Trays in Complete Set, \$1.50 each

W. N. KIDDER
433 Westminster St. Providence, R. I.

A GOOD SIGN

Made of cast bronze or alum-
inum commands respect
and admiration.

Ask your dealer or

BENKO BROS.

117 E. 15th St.

New York

A Benko Sign is never replaced

Serving the Profession for More Than Sixty Years
Insist Upon

"THE OLD RELIABLE."



If your dealer is unable to supply you, address
W. H. CLERKE, Special Agent **1136 Venango St., Philadelphia**

UNIVERSITY

The ORIGINAL Dr. Hartzell Brush

Scientifically constructed to simplify the more perfect cleaning of teeth—brushes especially designed for treatment of pyorrhea.



No. 2
Two Row

\$3.25 per dozen. \$36 per gross.

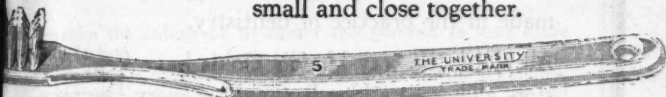
For general use on outside surfaces



No. 7
One Row

\$2.75 per dozen. \$30 per gross.

Ideal for children and adults where teeth are small and close together.



No. 5
Special

\$4.50 per dozen. \$48 per gross.

Inside lingual surfaces of all teeth—vitally necessary in the perfect care of teeth.



No. 1
3 Row

\$4.00 per dozen. \$42 per gross.

Small adult size for cleaning all outside surfaces—bristles trimmed to allow easy crowding between teeth.

**Terms 5% Discount—Cash With Order
Otherwise 2% 10 Days—F. O. B. Chicago**

JAMES R. IRVIN & CO., Inc.

230 South Wells St., Chicago, U.S.A.

"A Hand-Made, Imported Brush"

Milestones



In 1865 John Hood began the manufacture of Dental Golds. Abraham Lincoln was then President of the United States.

Since 1865 twelve other Presidents have taken the oath of office. Many things have happened, but from Lincoln to Coolidge, Hood's Golds have been used by a considerable portion of the Dentists of this country.

Since 1865 the Roentgen Ray has been discovered and many forward steps have been made in the practice of dentistry.

All along the way Hood's Golds have kept in step. There is a Hood's Gold for every Dental need, new or old.

In 1865 Hood's Golds were of dependable quality and honest value. In that respect the years have brought no change.

JOHN HOOD COMPANY
178 TREMONT ST., BOSTON

Lee
Ge
Dr
Ad
De



Is the Canal filled?

The fine pure silver wire
which forms the cores of

Smith's Silver Center Canal Points

enables the radiograph to answer this question to your entire satisfaction.

If, perchance, the canal is not filled properly or the Apical Foramen sealed, the entire point can be removed and access to the end of the root can be gained without drilling or reaming.

This, however, is merely one advantage of the silver wire.

This wire gives the point the rigidity to withstand the necessary pressure to force it to the apex of the canal without curling or "buckling" at the tip. But, with all its rigidity, the point is so flexible that it will follow the curvature of even the smallest and most difficult canal.

It is a point that will add 50 percent to your efficiency in filling root canals—a point which will minimize failures—a point you can always depend upon.

The best way to be convinced of this is to give them a trial on your next case.

And we will send you samples for that purpose if you fill in and mail the coupon.

Lee S. Smith & Son Mfg. Co. Sharpsburg Sta., Pittsburgh, Pa.

Gentlemen:—

Please send me samples of Smith's Silver Center Canal Points.

Dr.

Address

Dealer



el Señor
from Guatemala
says about
SED-A-VOL

"el muestra de su preparado SED-A-VOL lo que les agrade muchísimo pues con su uso obtuve excelentes resultados y prevenir en dos personas diferentes el molesto dolor post-operativo imprevisible en las extracciones de terceros molares impactados"

Dr. A. A. M.

"The sample of your preparation SED-A-VOL pleased me very much, I have obtained excellent results, and it has prevented post-operative pain in two different persons in the extraction of impacted third molars."

Dr. A. A. M.

This is but typical of the many reports that we get from dentists after they have tried this except onal, safe, non-depressant anodyne. SED-A-VOL was the pioneer in this field. Since its introduction thousands of dentists in this country, as well as in foreign countries have used it. It is the one safe and certain preparation to prevent post pain from developing, and to preserve

the satisfaction and good will of your patients.

Every day new users are added to our list. Perhaps you have not yet tried it. A liberal trial package for use in your next extractions, is the most convincing evidence that we can submit. Just tear this out and send us your name and address for the product.

DENTAL PHARMACEUTICAL CO., Inc.
HOLTON, KANSAS



FREE
This beautiful
Jar
 with each purchase
 of the
Economy
Package
 of
Mynol Tooth Cleaning
Tablets

To introduce the Economy Package and for a limited time
Saves \$1.00 and a Free Jar

MYNOL TOOTH CLEANING TABLETS

give you in convenient form a cleansing and polishing agent, with recognized physical and medicinal properties.

They are not only convenient for the operator but pleasing to the patient because of the sensation of cleanliness their use inspires.

They are germicidal, antiseptic, analgesic, astringent and cleansing. After their use the dentist knows that the mouth of his patient is in sanitary condition, and the patient experiences a delightful sensation of mouth cleanliness.

Economy Package and a FREE JAR - - - \$4.00
 (Only for a limited time)

Package of 100 Tablets - - - - - \$1.00

Order from your Dealer

Manufactured by

THE MYNOL CHEMICAL CO.

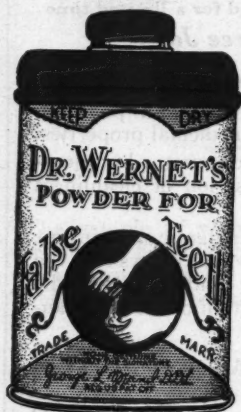
Service to Dentists

PHILADELPHIA



Cotton Rolls—We

The ORIGINAL Plate Powder



Sprinkle Dr. Wernet's Powder in jar of cotton rolls—shake up your You will have a cotton roll that "stay put" as soon as it is placed in mouth. It is white (invisible) and not tear the tissue when removed.

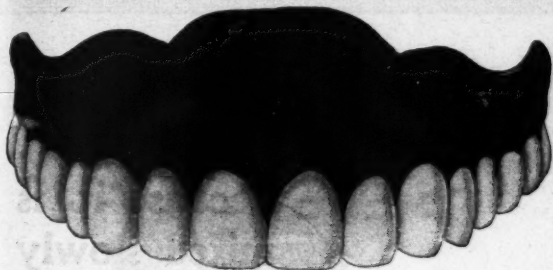
Dr. Wernet's Does These Things

- 1—Gives instant adhesion ("Suction").
- 2—Permits patients to eat meals the first day with comfort.
- 3—Stops any tendency to gag or vomit.
- 4—Enables patient immediately to talk properly.
- 5—Prevents rubber-sore mouth.
- 6—Overcomes nervous habit of pushing with the tongue.
- 7—Prevents despondency and disappointment.
- 8—Keeps patients cheerful and confident.
- 9—Creates satisfied patients and builds your business.

H. R. LAT &



U. S. St.
New York.
Sold by all drug stores and by mail.
WERNER & CO.



Wernet's Powder

Dr. Wernet's Powder for False Teeth

(A White Powder)

The latest tool in Dentistry. In color, taste, fragrance, and adhesive action vastly superior to any other apparently similar preparation.

Dr. Wernet's Powder for False Teeth

(A White Powder)

is being widely used by the profession

- On wax trial plates for articulation
- To keep cotton rolls from slipping and sliding
- To stop any tendency to gag or vomit
- On partial plates after extraction
- On temporary plates
- On plates for flabby ridges
- On old plates after changes have been made in them
- To eliminate bite plate trouble
- To cure blister or sore spot after plate has been trimmed

AT & COMPANY, Inc.

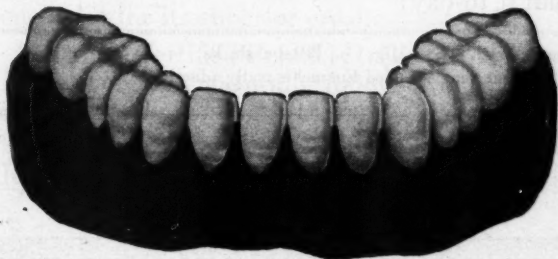
U. S. S.

16 St.

New Y.

by department
and houses

NEW F.G. CO.



It is Cohesive

Because it is
mixed slowly



If you would like a sample of Certified Enamel which will *prove* its adhesiveness have your secretary write your name on this coupon and mail it to-day:

.....
Lee S. Smith & Son Mfg. Co., Pittsburgh, Pa.

Show me that Certified Enamel is really adhesive.

Name.....

Address.....
.....



—and Cohesiveness measures Crushing Strength

IN A MATERIAL composed of molecules which are sufficiently adhesive to cling to the cavity walls, the molecules are sufficiently adhesive to cling to each other.

MOLECULES which cling to each other indicate cohesiveness and the degree of cohesiveness measures crushing strength. Certified Enamel, therefore, being more adhesive than any other silicate, is more cohesive and being more cohesive, possesses greater crushing strength.

The slow mix of Certified Enamel is responsible for adhesiveness and cohesiveness of the mass; hence also for its superior crushing strength.

—And since Certified Enamel is the only adhesive silicate there is it naturally follows it must have greater crushing strength than any silicate there is.

This is merely an appeal to reason.

Lilly's

SOLUTION

(DENTAL)

For the treatment of Trench Mouth (Vincent's and Ulcerative Stomatitis) has proven itself 100% efficient.

Try it on your next case. In the treatment of Pyorrhea and syphilitic manifestations in the mouth you will find it a material aid.

Sold on money back Guarantee. Price \$4.00 per 8 oz. bottle. Order through your dealer, or The HARMEYER & BRAND CO., Cincinnati, Ohio.

**THE LILLY DENTAL
PRODUCTS CO.
WELCH, WEST VIRGINIA**



FLECKS

RED COPPER CEMENT

Saves Deciduous Teeth

"One of the finest things we have ever used in our clinic in Denver and we have tried everything that has been put on the market."

From Proceedings A. D. A.
Los Angeles, 1922

A Few Facts

McCORMICK RUBBERS are scientifically formulated, so that when vulcanized at the prescribed time and temperature produce a *fully vulcanized denture*, free from porosity, with the minimum degree of shrinkage.

McCORMICK RUBBERS are remarkable for the ease with which they can be packed, due to their *improved plastic qualities*.

McCORMICK RUBBERS possess *exceptional strength*, and are susceptible to a very high polish, especially so when polished with McCORMICK'S DENTURE POLISH. This new polish is unlike others in that it can be washed off the teeth with water, eliminating the use of solvents.

McCORMICK RUBBERS are made in a variety of 25 colors, including

Blended Pink

Reg. U. S. Pat. Off.

"The Pink of Perfection"

McCormick Rubber Company, Inc., Lodi, N. J.

The Newest Rolling!

Have you seen the new ROLLING Rx? It is the one and only tooth brush, perfectly shaped like all ROLLINGS are, long curved bone handle, to insure a firm grasp, small as to size, dainty in appearance, bristles strong and resilient.

The dentists are recommending it. It is the only tooth brush of its kind, and may well be called "the dentist's ready assistant."

Every brush warranted.

Samples 65 cents each, postage prepaid.

ALL ROLLING brushes are imported.

THE ROLLING TOOTH BRUSH
COMPANY,
Montclair, New Jersey.

The new ROLLING Rx brush has been suggested by Dr. F. S. McKay, New York City, in conformity with the growing conviction that the brushes in general use have been entirely too large to reach and make contact with the tooth surfaces and properly frictionize them, particularly those teeth which are located in inaccessible positions in the mouth.



The
Danger Line



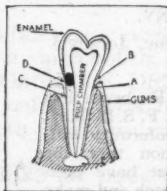
The
Danger Line

"THE DANGER LINE"

ALL SQUIBB announcements in the National Magazines are essentially educational. They convey to the public a message of good health and of higher standards in medicinal preparations. Squibb Dental Cream announcements are no exception. Through the recent use of "*The Danger Line*" theme, they are inculcating into the public mind the importance of oral hygiene, and the relationship which acid accumulation in the mouth, bears to tooth decay, gum diseases and general health.

It is generally recognized that the teeth are in greater danger from irritative and degenerating factors at the cervical margin than they are through loss from decay. There can be no question but that the cervical line is the real fighting ground, and that the preservation of the teeth depends upon conditions at "*The Danger Line*." Prevention of decay has long been stressed in the education of the public; conditions at the gum sufficiently emphasized.

Squibb "*Danger Line*" have proven such a potent factor in de-thorough prophylaxis hygiene, that the deserves to rank with adage "*A clean tooth*



while the unhygienic margin have not been sized.

Line" announcements popular appeal and picting the needs for at the gum line in oral "*Danger Line*" slogan the old schoolroom never decays."

E. R. SQUIBB & SONS, NEW YORK

MANUFACTURING CHEMISTS TO THE MEDICAL PROFESSION SINCE 1858.

STERN GOLDS

Stern Casting Golds

are preferred by the largest laboratories because of their superior merit.

Each has the necessary strength, springiness, and toughness; the right color, and the desired melting and flowing characteristics.

You can depend on them always to produce very good results.

For Dentures:

No. 1 for dentures. 8% platinum metals. Price per dwt., \$1.65.

No. 2 for dentures. Coin gold and 8% platinum. Price per dwt., \$1.80.

No. 3 for dentures. 18 Kt. with 3% platinum. Price per dwt., \$1.30.

No. 4 for dentures. 18 Kt. with $2\frac{1}{4}\%$ platinum metals. Price per dwt. \$1.25.

Plates and saddles casting gold in 18 Kt. grade. Price per dwt., \$1.00.

Plates and saddles casting gold in 20 Kt. grade. Price per dwt., \$1.10.

For Clasps:

Our highest grades:

No. 1 White. 20% platinized gold. Price per dwt., \$2.35.

No. 1 Yellow. 13% platinum. Price per dwt., \$2.00.

Our popular-priced grades (all yellow in color):

No. 2. 5% platinum, 18 Kt. gold. Price per dwt., \$1.50.

No. 3. Non-platinized. Price per dwt., \$1.40.

No. 1 for inlays. Platinized. Price per dwt., \$1.50.

22 Kt. for inlays. Price per dwt., \$1.10.

Pure nuggets. Price per dwt., \$1.18.

For Inlays:

Nota Bene: It is flattering to observe that four large makers of lingual bars have copied the flat anterior surface feature of the ARROW-HEAD Lingual Bars. One large advertiser has even paraded it in his latest announcement as a distinguishing feature of his "improved" lingual bar. No one, however, has so far succeeded in equaling the stiffness and strength of the material of which the bars are made.

Order from your dealer or from us.

I. STERN & CO.

106 West 116th St., New York City

Why It Couldn't Be Done

The combination of fruit acids and alkalines necessary to a really efficient dentifrice "couldn't be done" because such ingredients are incompatible in a single tube.

New-Mix is a revolutionary dentifrice, with separate pastes in a double tube, and with approved prophylactics scientifically isolated and fresh until the moment of use. In mixing the alkaline with the fruit acid content, — accomplished simply by squeezing the tube — New-Mix first acts mildly to curdle and dissolve the mucine plaques, and to remove discoloration stains, and

Sold at all stores

then reacts with the evolution of nascent oxygen and carbonic gas. It then leaves the teeth and gums mildly alkaline, depositing freshly mixed prophylactics heretofore incompatible, for the care of the gums.

The double tubes are steam-sterilized at our modern laboratories immediately before filling with their separate pastes. All the 22 cooperating substances and prophylactics entering into the composition of our formula have been skilfully chosen by eminent authorities.

Will you send for the full size tube for thorough trial?

of J.C. Penney Co.



NEW MIX TOOTH PASTE

mix it fresh on the brush

New-Mix Products, Inc.
11 W. 45th St., New York City
Please send me technical description of New-Mix
and tube for thorough trial.
Name..... Dentist
Office..... Physician
City and State.....

It Couldn't be Done



Drawn by George Brash

so we did it

When we showed the New-Mix formula of 22 ingredients to a foremost dental practitioner, he said:

A Leading Dentist's Opinion.—"This combination would be absolutely ideal, if it were possible. But it can't be done. If kept in one tube, the fruit acids will neutralize the alkalines; the gum hardening and anti-pyorrheas prophylactics will counteract; the monophosphates and carbonates cannot be combined."

When we showed the double tube and how easily the combination was effected—fresh on the brush at the time of use—and as a result purifying, cleansing, health-giving oxygen was liberated—"Marvelous," he said. "New-Mix is the one tooth paste I can conscientiously recommend."

How It Was Done.—New-Mix is 2 separate pastes in a double tube—one tube inside the other. In these 2 tubes are 22 ingredients which, because of their chemical activity, never could be combined in a single tube.

New-Mix with the double tube makes possible what the dental profession has long been striving for—all the beneficial ingredients combined in an activity which keeps the teeth clean.

Liberated Oxygen As Last.—As you press the tube, health-

giving oxygen is liberated by the combination of rich fruit acids (pink) and alkalines (white.)

This bubbling oxygen penetrates the smallest interstices and crevices of the teeth which the tooth brush can never reach—and is reinforced with freshly mixed and active prophylactics of lasting benefit.

The mucine plaques are dissolved, the tartar is loosened for the brush, the film and discolorations are scientifically removed.

Nature's Way.—New-Mix is not strong with drugs. The complete absence of soap and grit, the delicious, sparkling taste, the mild effervescence of fresh oxygen—all this is like sunshine, purifying, sweetening, cleansing.

Your dentist cleans your teeth.

—New-Mix keeps them clean.

SPECIAL TRIAL OFFER.

MOST good dentists keep it now. If you're not satisfied, send us the name and we'll let a full size tube—completely free. Other territories November 15, 1923. One tube sent to each address.

NEW-MIX PRODUCTS, INC.
9 West 54th Street, New York.

TO THE DRUGGIST

We do not believe in pushing New-Mix as a mere health builder and profit builder. That we wish you and your customers to have the very best of health and happiness. For every customer of yours who uses New-Mix, you will find your practice as it you make the sale.



NEW MIX

TOOTH PASTE

mix it fresh on the brush

Four-Wheel Brakes



*As easy to
operate as
a camera*

*T*HE thought that prompted progressive automobile manufacturers to equip their cars with extra brakes is the same thought that prompted Thwaites to make an X-Ray Unit with tube, meter and all wires enclosed in a cabinet.

And that thought was--

Greater Safety

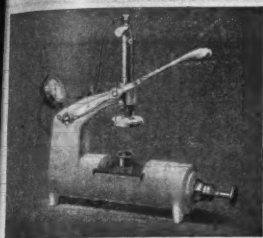
There is a booklet that will explain all about Thwaites—Ask for it.

THWAITES X-RAY COMPANY
GRAND RAPIDS, MICH.

Burg

When
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Do yo
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P. O. B



Burgard Casting Machine

When you buy a casting machine what are the points you look for and desire?

Do you know that an air pressure machine cannot give you the highest results unless so designed to give you Graduated Pressure, or Spot Pressure when indicated?

Do you ever have casting troubles? If so, does the company that manufactures your machine conduct a Technical Casting Department, which can give you expert advice?

Write for prices and complete information.

Falls City Dental Specialty Co.

P. O. Box 875

Louisville, Ky.

Do you swear—

every time you break an expensive bulb in your mouth lamp, or burn your patient with it?



Get this attachment for your Switchboard or Unit Mouth Lamp Handle

and you can use ordinary 15c bulbs—a cool bulb at tiny cost!

Have your dealer get one for you, or order direct. \$4.50 on 10 days' trial. No cost if not satisfied.

Economy Lamp Socket

H. P. Bremer, Frankfort, N. Y.



What they say about

DENTMEDIC

It is a positive Pulp Capper and Cavity Lining

ALL IN ONE

Easily applied, stays put. Does not run into retention points.

Warm bottle over flame a few seconds before shaking, apply DentMedic with loop broach.

Thousands of dentists are using DentMedic with best results.

Sole Distributor, Ransom & Randolph Co., Toledo O.

Tear this out and mail it to your dealer or will send direct upon receipt of \$1.50 check. DENTMEDIC LABORATORY, 3318 E. 55th St., Cleveland, O.

Send me 1 bottle DENTMEDIC (enough for 500 operations) \$1.50.

Dr.

Address.

Dilution	Number of Surviving Organisms at End of				Available Chlorine in Dilution
	5 Min.	15 Min.	30 Min.	60 Min.	
ZONITE					9.03 grams per liter
1:10.....	000	000	000	000	0.903 " " "
1:20.....	000	000	000	000	0.451 " " "
1:50.....	000	000	000	000	0.1806 " " "
1:100.....	000	000	000	000	0.0903 " " "
1:200.....	5,000	2,000	200	000	0.0451 " " "
1:300.....	35,000	20,000	20,000	15,000	0.0301 " " "
1:400.....	120,000	60,000	50,000	45,000	0.0225 " " "
DAKIN'S SOLUTION					4.68 grams per liter
1:10.....	000	000	000	000	0.468 " " "
1:20.....	98,000	16,000	1,800	000	0.234 " " "
1:50.....	290,000	110,000	61,000	9,400	0.0936 " " "
1:100.....	1,800,000	620,000	100,000	14,000	0.0468 " " "
1:200.....	2,200,000	1,050,000	340,000	149,000	0.0234 " " "
1:300.....	4,000,000	3,200,000	1,200,000	1,120,000	0.0156 " " "
CONTROL:					
5 c.c. Saliva + 5 c.c. water.....	3,900,000	4,000,000	4,600,000	4,200,000	

Determination of the relative germicidal properties of Zonite and Dakin's in the presence of saliva

The above chart is reproduced from a complete laboratory report
—now available upon request

ZONITE is a concentrated, stabilized and improved form of the Carrel-Dakin Solution, produced by an electrolytic process and, we believe, more nearly approaching the ideal antiseptic than any other germicide now available.

A chemical, bacteriological and biological investigation has been made to determine the value of Zonite as a germicide and local antiseptic, and the results are embodied in a report which charts numerous tests covering chemical composition, germicidal properties, haemolytic action, penetration, action upon living tissue, solvent action upon necrotic tissue and coagulating effect upon albumens.

Dental surgeons throughout the country are finding this improved and stabilized form of antiseptic a great benefit as compared with the necessity of preparing a new supply daily, as in the case of the Carrel-Dakin Solution. A printed copy of this report—with charts and sample—will be sent upon request.

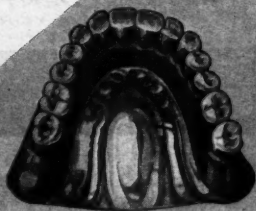
ZONITE PRODUCTS COMPANY
 342 Madison Avenue, New York City

The BERRY

Dental Laboratory Co.

Makers of the celebrated

Duplex Gold Denture



Upper Plate

\$25



Lower Plate

\$22

Construction

Trubyte teeth, granular gum, and Ash rubbers. Entire palate of upper and greatest area of lower denture is of 27 gauge 18 K. gold, securely anchored to the vulcanite by a series of retentions that permit a beautifully smooth finishing line between gold and vulcanite.

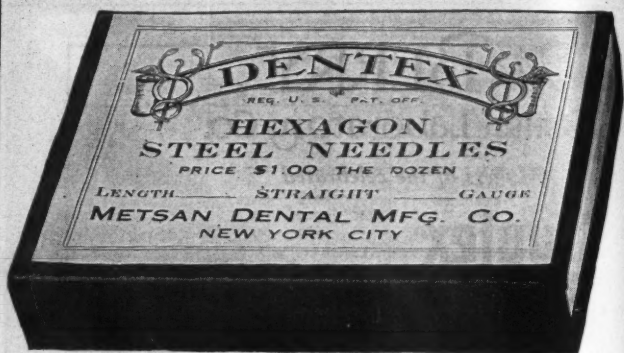
Fit

The periphery of muscle-trimmed impression is accurately reproduced in the vulcanite, thus securing the "valve" peripheral fit with the rubber—a result almost impossible with metal.

Instructions

Send perfect impression and bite. We will send the gold base, with teeth set up in wax, to be tried in the mouth before vulcanizing. We are prepared to furnish this class of work to laboratories not equipped to do it. Send for our new list of reduced prices on laboratory work.

The BERRY DENTAL LABORATORY CO.
EQUITABLE BUILDING, ST. LOUIS, U. S. A.



“Dentex is made by METSAN”

You've been looking for a needle which will give you good every-day service, and yet cost you but one dollar a dozen, haven't you?

Dentex is just the needle you've been looking for.

Not “fussed up”, without any of the fine details of the highest grade needles, Dentex is the needle which will give a dollar's worth of service,—and then just a little more. Many dentists want a good, reliable needle, like the Metsan, but their work does not require as finely and delicately finished a needle. To these dentists we

offer a good needle at One Dollar the Dozen.

And Metsan, the only specialist in dental syringes and needles exclusively, designed this needle after careful tests in practical experience. Just those features which make for service in a needle under ordinary circumstances, with just enough fineness to make it a trusty friend adequately describes DENTEX.

Dentex is a good dollar needle—you can take Metsan's word for that.

Ask your dealer—DENTEX, \$1.00 the dozen, standard sizes and gauges

DENTEX
\$1 The Dozen —

Write for a complete booklet describing dental syringe and needle equipment

Metsan Dental Mfg. Co.,
Please send free booklet:

211-3 East 62 Street, New York

Dr. Address

..... Dealer

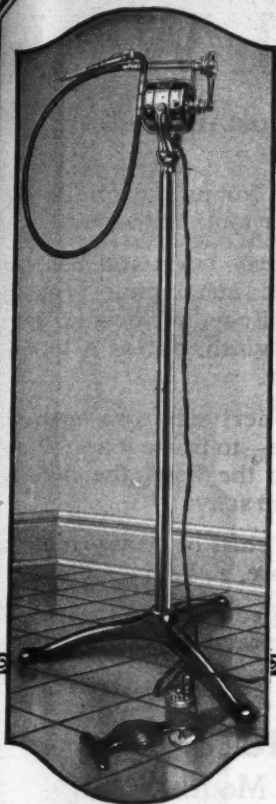
DUMORE Portable Dental Engine

Pedestal Type \$72.50

Table Base Type \$67.50

DESIGNED for work in hospitals and homes, or as an auxiliary unit. Valuable, too, in the laboratory for polishing and similar tasks.

Sturdy and dependable, it is just the tool for emergencies. Your dental supply house can furnish Dumore engines. Write us and we will gladly arrange for an office demonstration of this handy unit.



All DUMORE Dental Engines are equipped with S. S. White No. 7 Hand-piece; Slip-joint and 31 inch Flexible Shaft and

Sheath. To meet various requirements DUMORE Dental Engines are made in two styles—with Table Base and Pedestal Mounting.

Wisconsin Electric Company
3265 Sixteenth Street, Racine, Wis.



Table Base
Style

DUMORE DENTAL ENGINE

A Mouth Wash

With new, important factors

With calcium ions for use in checking bleeding gums and after tooth extraction.

With mild antiseptics—boric and benzoic acid, thymol, menthol and eucalyptol—to aid in healing, protecting, purifying and deodorizing. Not only as a mouth wash, but as a lotion, gargle, spray or douche.

With fruit acids—derived from orange, lemon, grape and apple—to make it a salivary stimulant. It increases the flow, the fluidity and the alkalinity of the saliva.

Without poisonous salts of heavy metals, so frequently used before.

The result of prolonged study to meet in all ways modern scientific requirements.

Formula B

The Modern Mouth Wash

Made by the makers of Pepsodent

Bottle to Try


Send the coupon with card or letterhead for a bottle of Formula B to try. Compare it with the mouth washes you have known.

The Pepsodent Company,
Dept. 1001,
1104 So. Wabash Ave., Chicago
Please send me without charge
full information on Formula B
and a bottle for test.

.....

.....

.....



75% of our re-
fining business
from repeat
customers.

25% of our
refining
business
from new
customers.

Scrap Gold Refining

75%
of our Business on Scrap
Gold Refining
from Repeat Customers

Most dentists who send us
scrap gold, find that it pays to
become a permanent custom-
er of our refining department.
We believe that a trial on your
part will also convince you.

Most dealers will gladly send your
scrap to us if you ask them. If not,
you can send it direct.

We pay the highest cash prices with
full allowance for all platinum, but
it will be to your further advantage
to instruct us to make returns in any
of the full line of Williams Golds.

The Williams Gold Refining Co.
Smelters and Refiners
Buffalo, N. Y.
Bridgeburg, Ont.

Specify
Williams Golds

Plates
Shells
Wire

Solders
Clasps
Nuggets

Casting Gold
Lingual Bars
Filling Golds

(See announcement on reverse side)



Willgold-3

For Better Inlays

Willgold 3 plus your skill—and you have the formula for making perfect inlays.

Willgold 3 is a 100% fine gold alloy with enough platinum to render it hard enough to preserve the smallest margins. It casts clean with minimum shrinkage.

The few cents that Willgold 3 adds to the cost of an inlay is more than offset by your satisfaction in the perfection of the results obtained.

Price \$1.30 per dwt. from your dealer

Most reputable dealers carry a stock of the complete line of Williams Golds. If yours does not, we will gladly send you the name of one that does.

The Williams Gold Refining Co.

Smelters and Refiners

2978 Main Street

Buffalo, N. Y.

Bridgeburg, Ont.

Specify
Williams Golds

Plates
Shells
Wire

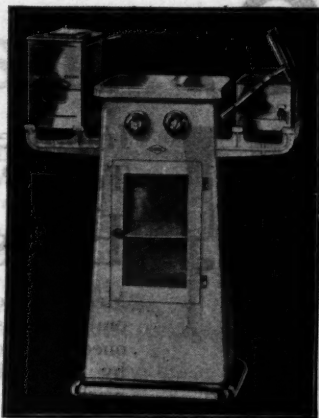
Solders
Clasps
Nuggets

Casting Gold
Lingual Bars
Filling Golds



"Every patient looks for a
sterilizer"

Your patients know the difference



*This new No. 1414-A
is the best moderately
priced equipment you
can get. It gives you
great convenience. See
it at your dealers, and
send for new complete
catalog "I".*

They know adequate steriliz-
ing equipment, and they sense
the lack of it.

If they see a steaming steril-
izer as they go to the chair
they are reassured.

If they fail to see one they
wonder how you have cleaned
the instruments you use in
their work.

It pays to sterilize well, and
publicly.

Please send me, without obligation, data on your sterilizer No. 1414-A

Dr.

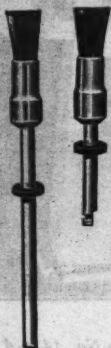
Address

CASTLE

Sterilizers for Dentists, Physicians and Hospitals.

WILMOT CASTLE CO., 1158 University Ave., Rochester, N.Y.

Crescent



Patented

Improved Mandrel Mounted Tooth Polishing Brushes

Meet all the sanitary requirements of the oral hygienist. Cheap enough to be used once, then discarded, or can be sterilized by all modern methods and used until worn out.

Highest quality. Made from the best bristle obtainable. Assembled in such a way that it is impossible to pull out the bristle. Always fit the handpiece perfectly.

Not an experiment. Have been on the market for six years. Are being used by thousands of dentists throughout the world and pronounced a marvel.

Absolute satisfaction. Will satisfy the most exacting doctor. Are sold on a money back guarantee.

Priced right. Universal No. 7 handpiece; per doz. 40c, per gross \$4.00. Right angle No. 2 handpiece; per doz. 50c, per gross \$5.00.

Samples on Request

From your dealer or direct

Crescent Dental Manufacturing Company

Manufacturers of

CRESCENT BROACHES SINCE 1900

2214-2218 South Sawyer Avenue

Chicago, Illinois

Answers to Pepsodent questions

No.6—Why So Different?

Because Pepsodent is mildly acid, to conform with the dominant modern dental opinion. Former tooth pastes, based on soap and chalk, were alkaline.

The mild acid acts to disintegrate the mucin plaque—to curdle or flake it—at all stages of formation.

It also stimulates the salivary flow and reduces its viscosity. It increases the alkalinity of the saliva, also its ptyalin content. And ptyalin is there to digest starch deposits.

Absence of soap lubrication makes the polishing agent conspicuous. But this agent is mild and soft—much softer than enamel.

It is a blend of calcium phosphate and anhydrous calcium sulphate, finely powdered. These, in their pure state as we use them, form the ideal polishing agent.

These unique features bring up questions, and convincing tests have answered them decisively.

In one, natural teeth have been immersed for four years in Pepsodent mixed with saliva, and has proved that the acid does not harm.

In another, natural teeth have been brushed with Pepsodent up to 250,000 times without the least sign of abrasion.

Send the coupon for answers to all Pepsodent questions, and a tube for testing at your chair.

Pepsodent PAT. OFF.
REG. U.S.

The Modern Dentifrice

THE PEPSODENT COMPANY, 3323 Ludington Bldg., Chicago, Ill. 1229

Please send me, free of charge, one regular 50c size tube of Pepsodent, with literature and formula.

Name.....

Address.....

Enclose card or letterhead



Human Nature hasn't changed.

there is that same inherent compelling passion for appearance in all ages and races of mankind.

IT matters not where we may search in the records of the human race, we find that same striving to improve appearance. We have come a long way from clay-daubing aborigines to the flower of modern civilization, but the only change lies in a developed taste.

Every dental practitioner knows how the teeth affect appearance, and every patient who has lost teeth or who faces such a loss is worried more about appearance than any other one thing. At such a time Trubyte teeth are appreciated by both patient and practitioner.

Trubyte

—the teeth that “naturalize” artificial dentures

The desire to appear attractive is so fundamental that the most basic of sensations—*hunger*—is denied gratification by thousands, and every crime on the calendar has been committed that the natural vanity of mankind be satisfied.

When you can restore facial beauty in many cases, actually improve appearance in others, and sustain health through efficient mastication with Trubyte teeth, you are justified in using your knowledge of this fundamental passion for appearance by suggesting the advantages of Trubyte teeth to your patients. Especially are you justified when you know that everyone will be benefited—your patients, their friends, and yourself. Conferring a mutual benefit is always right.

When anything so vital to appearance as teeth is concerned you will find that the natural desire to retain or improve appearance and conceal one's loss will make the average patient eager to learn of the possibilities of Trubyte teeth.

RESTORATIONS  THAT RESTORE

The DENTISTS' SUPPLY COMPANY
of NEW YORK

(Trubyte Teeth are known as Anatoform Teeth in Europe, Great Britain and her Colonies.)



BURNT OFFERINGS

When base metal pins are baked into the porcelain of miscalled "cheap" teeth, the base metal is oxidized—in other words, *burnt*. Such teeth are the "burnt offerings" of dentistry.

There was a time when "burnt offerings" were supposed to be in good taste, but

happily those days are past. Today "works" are believed to be more efficacious.

Of course, a good many teeth with baked-in base metal pins are sold, and some of them probably give fair service, *but why take a chance* when, for a few cents more, Twentieth Century Solila teeth with Pure Gold Clad pins will safeguard your reputation for skillful service? It doesn't require many dissatisfied denture patients to take all the joy out of life, so *why take a chance?*

Practically every patient will gladly pay the slight difference in price between the "burnt offerings" and Twentieth Century Solila teeth—so why worry? You don't have to pay the difference, yet you are sure to benefit. Why take a chance with "burnt offerings?" Be known by your "works."



THE DENTISTS' SUPPLY COMPANY
NEW YORK



Why SOME DENTURES FAIL TO FIT

The texture of the model, the

closing of the flask, faulty occlusion, imperfect impressions—these are only a few of many causes, any *one* of which will cause a misfit plate.

WHY WORRY?

B. P. P. enables one to overcome these misfortunes without remaking plates. There are two ways to do this: **INDIRECT**, by model—or **DIRECTLY** in the mouth.

B. P. P.

B. P. P. is a non-elastic, plastic, vulcanizable paste, a little heavier than tooth paste, and is used for correcting the fit of loose or misfit plates without the necessity of remaking. Briefly it is used as follows:

A sufficient amount of paste is placed on plate and is pressed to place either on model or in patient's mouth. The excess squeezes out and only enough remains on

plate to compensate for defect. Flask with one pour, no opening of flask necessary. Vulcanize same time and temperature as vulcanite rubber. Colors, red and black. Full directions with each package. Enough for 8 to 10 dentures. Price, \$3.50.

For sale by dental supply houses everywhere. If ordering direct send post office order or draft, Dept. H., Pioneer Mfg. Co., Macon, Mo.



easy!

Through years of dental casting the "bucket" has persisted because it is based on a *positive* natural force. But casting buckets have not changed much. Now they have, though! Here's the *E-Z Caster*. Extensive test has proved it ideal for inlays, small pieces and clasps. The shape and the absence of holes preclude loss of metal. It accommodates rings of various sizes without wobbling. Investment can't move. Gold can't escape. Made of brass and steel, it is light, strong and durable. It rotates smoothly. It cools instantly in cold water.

Chain and handle are not shown in the picture. With rings and sprue-former, \$5.50; thru your dealer or direct—and guaranteed.

Order now

Valley Manufacturing Co.
Youngwood, Pa.

E-Z Caster



JELENKO Ready-Made CLASP

PATENTED



Let us now consider the Jelenko Ready-Made Clasp for large cuspids. This clasp has the hair-pin form throughout. Notice how this form lends itself to easy and perfect adaptation.



If the clasp interferes with the bite, cut the lingual part and spread the ends (B) so as to avoid all interference.

In extremely close bite cases, the incisal portion may even be cut away and the remainder bent to follow the cervical margin.



You may treat the labial part similarly to avoid showing too much gold.

The Jelenko Ready-Made Clasp is made in 7 sizes, rights and lefts, and will fit any tooth. Our "Technique Book," free on request, will tell you more about this remarkable clasp.

Sold by Better Dealers Everywhere.

J.F. JELENKO & Co.
136 West 52nd. St. New York, U.S.A.

Dr. Riddle's Universal Dental Matrix Retainer*For Dentists of Precision*

5 seconds to apply band. Curved band (1-2500 in. thick) tough and plastic.



Especially adapted for step cavities, amalgam restoration and gold inlay work. Can be slipped between all contact points. Quickly and easily adjusted. Used by leading dentists the world over.

\$3.00 with 12 bands. Extra bands 25c dozen.*Your dealer or direct.***RIDDLE & WISE****St. Francisville, La.****Dentists Agree**

that canals of infected roots can be easily and successfully treated and filled when a sinus is present.

Create a sinus with Dr. Stempel's**Suction Cup Dental Plaster**

a counter-irritant not a poultice.

The effect is concentrated and less tissue is involved.

Will stop pain in all acute inflammation.

Still only \$1.00 per Box of 100 Plasters.

*Write for sample package***Stempel Dental Specialty Co., Fort Madison, Iowa****MU-COL—the economical oral antiseptic**

We want to send you a testing package sufficient for 12 pints of solution.

MU-COL is the oral antiseptic in *powder* form—instantly soluble in warm water; the cost of solutions is trifling. Even the free testing package which the coupon brings is enough for 12 pints of solution.

MU-COL is economical. Many oral antiseptics are quite costly if freely used. MU-COL combines economy with real effectiveness. Its quick healing and sedative action following extractions is something you'll appreciate—and it aids in controlling incipient pyorrhea. So that you may duplicate the experience of the many dentists now using and prescribing MU-COL, we print the coupon below.

The Mu-col Company, Tupper & Edwin Place, Buffalo, N. Y.

Dec.

Please send free package of Mu-Col to

Dr.

Street & No.

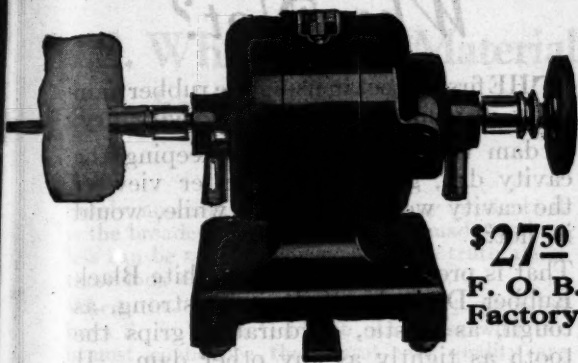
City

State

MU-COL Cleanses, Purifies and Heals

DUMORE

LATHE for DENTISTS



\$27⁵⁰

**F. O. B.
Factory**

SPECIFICATIONS AND EQUIPMENT—Motor—1-3 H. P. Universal. Speeds—Five, 2000 to 6000 R. P. M. Controlled by rheostat in motor base. Shaft tapered at both ends. Will take Rittler chucks or special 5-32" Goodell-Pratt chucks. Complete equipment includes wheel arbor and emery wheel, tapered spindle and rag buff, 3' cord and attachment plug.

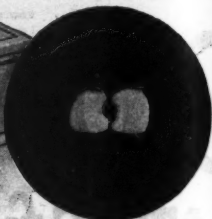
BUILT for speed and service, the **DUMORE** Lathe Motor is everywhere accepted as the quick, economical solution to the dentists' polishing and buffing problems.

Operating on alternating or direct cur-



rent the **DUMORE** is unusually adaptable. The best dental supply houses carry **DUMORE** Lathes. We shall be glad to furnish you with more complete information and a source of supply if you will write us today.

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Why Not?

THE first object in using the rubber dam is of course to keep the cavity dry.

A dam that, in addition to keeping the cavity dry, gives you a better view of the cavity would be worth while, would it not?

That is precisely what S. S. White Black Rubber Dam does. It is as strong, as tough, as elastic, as durable, grips the tooth as tightly as any other dam. It brings the tooth out in contrast to its dead blackness, makes the detail of the cavity clear. And it costs no more than the dam that merely keeps the cavity dry.

S. S. White Black Rubber Dam

In cartons, yard and half yard,
5 and 6 inches wide

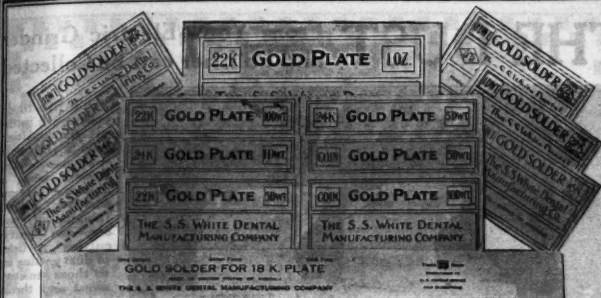
Per yard (1296 sq. inches).....	\$1.50
" half yard (648 sq. inches).....	.80

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THE S. S. WHITE DENTAL MFG. CO.

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S. S. White Gold Materials have every desirable quality

Surely no more can be said of any product; it is the broadest claim that could be made; and no less can be said to convey the whole truth about these long established gold materials.

When the dentist or the laboratory specialist buys S. S. White Golds he can do so with the utmost confidence that karat and quality are exactly as represented, and that everything stamped on the gold or printed on its envelope is a reliable description of the article.

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Our booklet "Uncompromising Gold for Prosthetic Dentistry" contains valuable data on Precious Metals, showing their melting points etc., and you should have a copy within reach at all times. We'll mail it to you without cost.

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"Since 1844 the Standard"
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From Your Electric Grinder
and Polisher can be Collected



You'd like to do your work without the resulting dust if you could—anyone would. Besides being a nuisance its a positive danger. Imagine if you can—the gritty, cutting particles of dust getting in to those sensitive nasal and throat passages not to say your lungs as well. What havoc they could work after a continual collection of months or years. Don't shudder at the thought but get at once some real protection for your laboratory.

Insure
Your
Health
The Cost
is Low
But Do It
While it is
Yet
Possible

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BROS.
SILENT
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**DUST
COLLECTOR**

A newly patented machine occupying only 18 x 28 inches floor space—finished in white enamel—operates from an electric light. It has a very powerful air suction that collects the dry dust and removable water pans for wet pumice.

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60-62 RK LISPENARD ST., NEW YORK CITY
Makers of good machinery for 35 years.

**WE ALSO
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Laboratory Work Benches, Gold Rolling
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**WE ALSO
MAKE**

Ash's Dowel Crowns in Vulcanite Work

Give the Full Lingual Aspect.



When attached with the Anchor Bar and Posts have great strength and give tongue space in the oral cavity which is impossible with any other tooth in Vulcanite Dentures.

Prices complete:

14 Dowel Crowns, Anterior
and Posterior - - - - \$2.50

1 Baker 14kt. Gold Cased
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\$4.00

Combination:

6 Dowel Crowns Anteriors
8 Diatoric Posteriors \$1.75

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1 & 3 Union Square

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A popular cabinet, Style 108, equipped with a new arrangement of glass trays—the original round-cornered “Gold Medal” cabinet, the last word in utilities, design and finish. No advance in price on this style.

Peerless Harvard chairs and Harvard instrument cabinets do their own advertising. This is only an invitation to you to see them and examine their superior adaptation to all requirements, accurate workmanship and fair price before purchasing elsewhere.

Harvard chairs are to be found on the floors of the best dental depots in the country. For Harvard information consult the dealer who sells Harvard goods, or write the Harvard Company, Canton, Ohio, for detailed information, cheerfully given, without obligation.

Yours very truly,

The Harvard Company

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Belongs to the Platinum group—which includes Rhodium, Iridium and Osmium. It is one of the two metals (the other is 24K GOLD), which fused together make the wire for our precious Metal Pins.

Aside from Platinum (the price of which makes it prohibitive for tooth pins) there is no metal or other combination of metals that possesses the **HIGH FUSING QUALITIES**, the **DUCTILITY** and the **STRENGTH** of P. M. metal.

In giving you this combination of metals in **JUSTI P. M. (Precious Metal) TEETH** we feel that your vulcanite cases and crown and bridge work should share equally in the highest grade pins.

Your dealer will select these teeth for your cases if you instruct him to do so.

H. D. JUSTI & SON

Manufacturers of

Porcelain Teeth

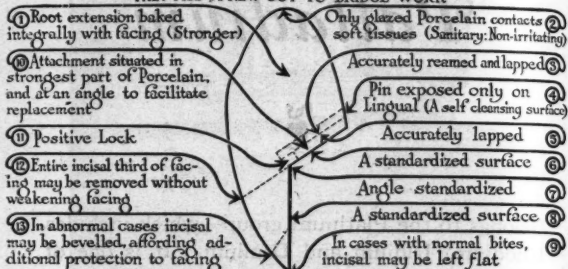
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THEY ADD A NEW JOY TO BRIDGE WORK



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our thought instinctively turns
towards the many friends and custom-
ers with whom we have labored in
our chosen field, and it is with sincere
pleasure and appreciation that we
extend our best wishes for a right

MERRY CHRISTMAS

AND

PROSPEROUS NEW YEAR

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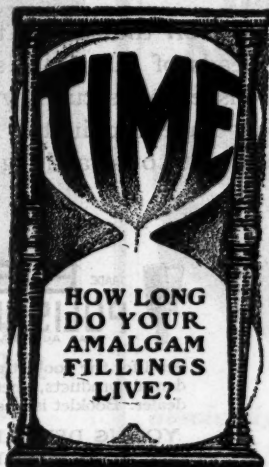
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BUFFALO, N. Y.

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CRESCENT ALLOY

THE TOOTH SAVER

Makes an Enduring Filling.

It has been used in dental practice round the world for more than 30 years.

THE REASONS WHY—Pure Ingredients, Perfect Color, No Discoloration, No Shrinkage, Ample Edge Strength, Fine Working Qualities.

Five Oz. Jar, \$9.00

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At all Dental Depots

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NEW YORK

They can't scratch the surface to be polished. The heads of the metal screws, to which B.S. Polishers are securely vulcanized, are completely imbedded in the rubber to avoid the possibility of scratching.



TRADE **BS** MARK
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Send for the booklet about Young's dental products, mentioning your dealer. Booklet is free of course.

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**Do you know
ARDICO?**

It is an unusual tooth-powder
—it may be dissolved in water
and used as a mouth wash.

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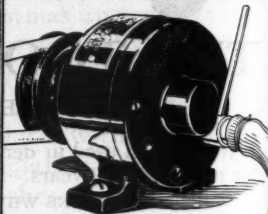
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Ask about the Ver-
non Rotary Compress-
or—details from your
dealer or Lee S. Smith
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THE Balter full upper and lower sectional trays will take the most perfect and difficult partial impression in a very short space of time with marvelous ease and simplicity.

The ease of operation is of great satisfaction to dentists because the patient is entirely relieved of all pain, distress and inconvenience. There is no bleeding or tearing of gum tissues and loose teeth in pyorrhea cases will not pull out.

These trays are superior for one half or three quarter mouth impressions, interior and small bridge impressions.

PRICES

Per set of 6.

(Nos. 1, 2 and 3) \$10.50
or \$2.00 per tray.

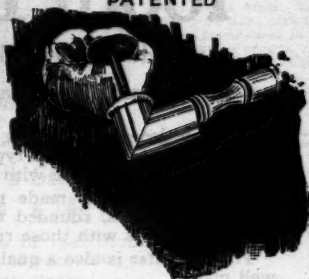
Through your dealer or direct

**THE BALTER TRAY
MFG. CO., INC.**

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Brooklyn, N. Y.
U. S. A.

Burlew Sulci Discs

**MIDGET SIZE
PATENTED**



***absolutely necessary
in a case like this***

After carving these sulci in an amalgam filling or gold inlay, you cannot risk losing their clean, sharp lines by using large polishing discs. Burlew Sulci Discs, small and with a knife edge, were suggested by Dr. J. M. Prime for just such cases, and will reach and polish every surface.

Burlew Sulci Discs are equally valuable in polishing fillings which extend to or below the gum line, as in the tooth shown. Being so small, you can work them close to the gum without tearing it.

Don't Wait—Buy a Box

\$1.00 a box of 25 discs

With special straight and right angle
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Wheel shape only

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Decoater Tooth Brushes

Made by the makers of Pepsodent

Made to Dental Specifications

Leading dental authorities, some time ago, worked out specifications for the right type of tooth brush. We believe that most dentists agree with them.

The Decoater was made to those specifications, for in shape, separations, rounded tufts, trim, length of bristles, etc., it conforms with those requirements.

The Decoater is also a quality brush, American made and well made.

Each tuft of bristles is separate. So whenever a shorter brush is desired, one may trim off one or two back rows.

Pocket Style Also

The Decoater comes in two styles—Home and Pocket Style. The Pocket Style is for children at school, for men in business, for people away from home.

The metal case is permanent. The brushes, as they wear out, are replaced by refills.

The Decoater is now supplied by druggists in general. Home Style, 50c. Pocket Style, \$1. Refills for Pocket Style, 50c.

We will send a sample of the Home Style to any dentist on request. Or the Pocket Style for 50c.

Home Style



Pocket style folds into this ventilated metal case. Brushes replaced by refills.



Pocket Style

THE PEPSODENT COMPANY

Decoater Brush Dept.

1104 So. Wabash Ave., Chicago



No. 1



No. 2

Some Pustolene Case History

Patient desired replacement of fillings in upper left central and lateral incisors; finding these teeth devital, radiogram No. 1 was taken (Dec. 1920). After routine treatment roots filled with PUSTOLENE and gutta percha points. Radiogram No. 2 taken April 1923: marked improvement in apical conditions evident. J. A. SPRAGUE & CO., Columbus, Ohio. *Have you sent for a sample of pustolene?*

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Quantity packages. Packages of real economy—they cover what is necessary, or of your own selection.

Harvard Cement—4 colors—full liquid..... \$8.00

Harvardid Synthetic Porcelain—2 colors, \$4.75—6 colors, \$13.00

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QUALITY LEADERS from the makers of the best in Dental Office Apparels

Style 30	from fabric	05 Middy Twill	\$3.50 each or 3 for \$9.00
30	"	04 Galatea	5.00 " " " 13.50
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CHAIR COVERS For all make chairs \$2.75
per set or two sets for \$5.00.

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For the Assistant

Quotations are on fabric 31, Nurses Onlin
Uniform Cloth, very serviceable, indestructible linen
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Standard sizes	Style 56 or 48	\$4.00 each or three for \$10.50
run 34 to 46.	" 54	4.50 " " " 12.00
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All Uniforms made short or long sleeves. If you don't specify we send as shown in illustration.

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The patient who comes into the office of the Dentist who has a Clark Unit Pedestal, focuses his eyes on two objects, the Operator and the CLARK UNIT; the former animate and the latter inanimate, but both possessing a distinct personality.

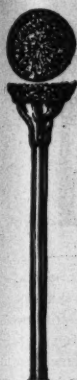
A Clark Unit helps you mechanically and electrically. Its personality attracts both the scientific and esthetic eye, because it is different and distinctive from all fixtures in that class.

A. C. CLARK & COMPANY

Manufacturers

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\$1.00
a Dozen

\$50,000.00 Damages!

Mouth Cut by Whirling Tooth Brush, He Asks \$50,000 Damages of Dentist

Fifty thousand dollars for injuries has been impeded and he has been unable to work. He has also lost weight from loss of blood and has become detached and iscorrupted the flesh under his tongue, was asked yesterday at

From N. Y. Evening Journal, July 17, 1923

HAKINS CLEANERS ALWAYS SAFE AND EFFICIENT

Clean teeth without lacerating gums or abrading enamel. No spattering; absorbs and carries liquid, powder or paste. Ideal for polishing inlays and fillings. May be used for massaging gums in cases of pyorrhea with engine running on low.

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Auto-Clavette
Type A. W. P.

Quick!

Less than 2 minutes to destroy bacteria on instruments and dressings. Superheated steam is quick and certain. That's why leading colleges and clinics prefer

PENTZ STERILIZERS

\$35.00 up. Get the booklet!

The SANTISEPTIC MFG. CO., Inc., 11 Beach Street,
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A Phenol Solution with a "Governor"

Sodiphene

TRADE MARK REGISTERED

"First Aid for the Family"

The use of Sodiphene by dentists has resulted in many favorable criticisms of its antiseptic and germicidal qualities. Members of the profession have often termed it a phenol solution with a "Governor" because of its ability to destroy germ life without injury to the healthy tissue.

Dentists will find that Sodiphene is a perfectly safe antiseptic and germicide for home use as well as for use in the professional office. It is a dependable healing agent for cuts, burns and bruises, as well as for sore throat, tonsillitis and cold in the head.

Dentists who have not given Sodiphene a thorough trial will be supplied with a professional package upon request. Address—

THE SODIPHENE COMPANY

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Do this first—

Just spray mouth and throat with Oleoseptine, full strength; the patient will be quick to sense the delightful effect.

Oleoseptine Liquid is a great aid in preparing patients, since, in addition to its antiseptic action, it possesses a pleasing, mild, local anesthetic action.

This characteristic of Oleoseptine makes it particularly useful in extraction cases.



Oleoseptine is the oral antiseptic which does not inhibit salivary flow nor act upon the enzyme ptyalin—the starch-digestive principle of saliva. Be sure to mention your druggist in requesting testing package. The Foster Laboratory, 95 Roseville Ave., Newark, N. J.

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is all that it will cost you to supply each patient with a fresh, clean head-rest.



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Hygienic Dental Head-Rest Pads

eliminate the expense connected with the old-style head-rest napkins.

They are made in two styles--

No. 2 pads are made of white crepe paper.

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Two pairs of either style (enough for 200 sittings) in a box and the price is only \$1.50.

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are sending the
ToothBrush Man's Own Book
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Juvenile Patients
—as a—
CHRISTMAS GIFT
Not a bad idea, is it
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Sixty-five cents to Dentists

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Sizes from

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Your dealer has a complete stock or can get them for you.

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Countless Thousands

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SOMNOFORM ANAESTHESIA

SOMNOFORM produces a natural sleep, from which your patients awake refreshed and invigorated.



After over twenty years, SOMNOFORM has been gaining increased confidence of both the Dental and Medical Profession. With SOMNOFORM properly induced—

Shock is eliminated.

There is no hysteria.

No unpleasant post operative results occur.

There is perfect relaxation.

Economy and simplicity of administration are paramount.

YOUR SUCCESS AS AN ANESTHETIST IS INSURED WITH SOMNOFORM AND THE STRATFORD-COOKSON SURGICAL INHALER.

Please send me reprint and Technic Chart on the administration of SOMNOFORM.

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REMEMBER when you had to go to the tailor and select the kind of cloth you wanted for a suit—then stand on the block and be measured—then go back for a half-dozen fittings—and, in the course of six weeks or two months, have the suit delivered and found it didn't touch you anywhere or else you had to pry yourself into it with a shoehorn?

Remember?

Well, those days are gone forever.

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Let us tell you more about them and the beautiful mahogany cabinet we are offering free.



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If you've hesitated about getting yourself a rubber chair mat, either because of cost, or because all the mats you had seen were bigger than you wanted—you'll be glad to know about the new **STAND-E-Z-MAT**.

We investigated—aided by some of the leading dental equipment manufacturers—and discovered that a 60-inch mat is the ideal size. It provides ample foot-room, but does not extend beyond the chair far enough to obstruct free movement about your operating room.

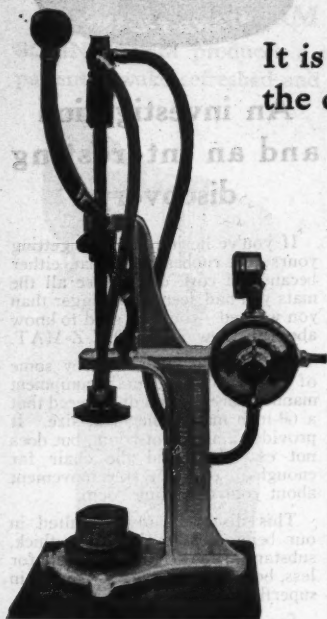
This discovery also resulted in our being able to design a thick, substantial mat that would sell for less, because no rubber is wasted in superfluous width.

Send your card and your dealer's name, for details and prices, to O. W. Jackson & Co., 249 West 34th St., New York, N. Y.

STAND-E-Z MAT

*"Understands" the Den-
tist's Comfort*

You Can See What You're Doing



It is an easy matter to get
the desired results with a

Burns Dental Casting Machine

as the entire casting operation is in plain view of the operator and under his control at all stages.

That, however, is only one of the many features of the machine that enables you to get 100% perfect casts.

Ask for the booklet
that tells you all
about it.

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The care, the skill, the experience that resulted in producing Corning Dental Rubbers of tensile strength, elasticity, easy packing, has stood the test of years.

Blended Pink

—does not shrink
Lifelike tint

Superior strength
Packs easily

Trial box $\frac{1}{4}$ lb. \$2.50

Golden Plate

Wonderful color
Vulcanizes without pits or porosity

\$4.00 per pound
Sample box $\frac{1}{4}$ lb. \$1.00

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- ☐ Spl. Lt. Pink
- ☐ Light Pink
- ☐ Deep Pink
- ☐ White

BASE PLATES

- ☐ Light Red
- ☐ Medium Red
- ☐ Dark Red (Brown)
- ☐ Maroon
- ☐ Golden Plate
- ☐ Dark Natural
- ☐ Black
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This brings either the free sample or the $\frac{1}{4}$ -lb. box.

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1/4-lb. box at \$2.50
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Dental office, outfit and location in Kentucky of twenty-five years standing; population eight thousand. Price reasonable for immediate possession. Address Dr. W. E. Simmons, 444 South Fourth Avenue, Louisville, Kentucky.

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Dentists from local and distant states send their relatives, friends and employees here for training because they know they will return well grounded in the fundamentals of mechanical dentistry and be found able to go to work in the laboratory. Board and lodging arranged for in advance. General Course or Post Graduate Course. Send for Catalog D. West Side YMCA School of Mechanical Dentistry, 318 West 57th Street, New York, N. Y.

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QUICK COLLECTIONS—Send us your accounts today and get "Quick Results." Collections made everywhere. Wm. H. Dodd, 87 Nassau Street, New York. Established 30 years, one address.

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The healing and preservative
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makes it an ideal remedy for
the treatment of exposed and
even inflamed pulps, as well
as hypersensitive dentine.

A single trial will convince
you.

Your dealer has it in—

Regular size package, \$2.00
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1181 Broadway
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When You Do It the Masel Way—

Simply prepare the tooth,
select a *Masel Ready Made
Gold Crown* of proper size
and shape, fit over the tooth
and to articulation, trim to
gum outline and the crown is
ready for cementing.

It's So Easy



Masel Dental Laboratory
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IMPORTANT

For correct Root
Canal work it is
essential that you
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instruments

KERR
REG. U. S. PAT. OFF.

Pulp Canal Files
Pulp Canal Reamers

*Made in various
styles and sizes*

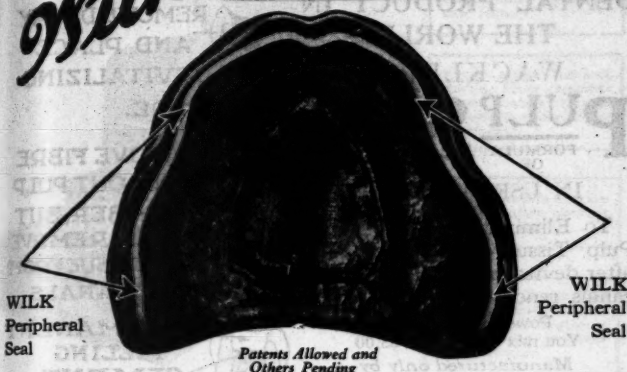
AT ALL
LEADING
DENTAL
DEPOTS

Manufactured
by

DETROIT DENTAL MFG. CO.
Detroit, Mich., U. S. A.



Wilk Peripheral Seal



Over Compression, Atrophy, Rebasing, Pain

Most modern technics produce a terrifically tight denture which, thru over compression, causes atrophy of the peripheral tissues with subsequent loosening of the denture, which then requires rebasing—sometimes two or three times. Such a denture causes your patient pain and discomfort because of the vise-like grip of the hard vulcanite.

Wilk Peripheral Seal Eliminates Them All!

Over compression, atrophy, rebasing, pain and discomfort are all eliminated and perfect retention is secured by the use of the Wilk Peripheral Seal which is a specially molded, specially compounded soft rubber bead projecting slightly along the periphery of the tissue bearing side of the denture. It is strong and durable, but, nevertheless, soft, velvety, yielding and non-irritant, its elastic properties completely sealing the periphery with the soft, velvety touch of a rubber glove. Try it on your next denture.

When supplied in new denture made by us, extra **\$2.50**

When inserted in old denture, including new gum **4.00**

NOTE: Above price for insertion in old dentures does not cover relines, duplicates or resets

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"JUST A REAL GOOD LAB"

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Wilk Dental Laboratory,
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Please send me, without any obligation on my part, complete booklet about your Wilk Peripheral Seal.

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THE FASTEST GROWING DENTAL PRODUCT IN THE WORLD

WACKLER'S

PULP SEAL

FORMULA
OF

E. C. Wackler
D. D. S.

IN USE SINCE 1900

To Eliminate the removal of
Pulp Tissue from root canals
after devitalizing, and filling root
canals rendered aseptic.

Powder and Liquid
You mix 'em—Price \$3.00

Manufactured only by

E. C. WACKLER DENTAL
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MILWAKEE, WIS., U. S. A.



REMOVE DECAY
AND PLACE
DEVITALIZING
FIBRE.



REMOVE FIBRE
DRILL OUT PULP
CHAMBER, BUT
DO NOT REMOVE
PULP TISSUE FROM
ROOT CANALS



PERMANENT
FILLING
CEMENT
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BREWSTER ALLOY

THE AMBER BOTTLE ALLOY

OUR reputation for Quality in the man-
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SHAVINGS AND FILINGS
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ONE AND FIVE OUNCE PACKAGES

FIVE
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\$9.00

TWENTY
OUNCES

\$32.00

The single ounce rate is \$2.25 per ounce.

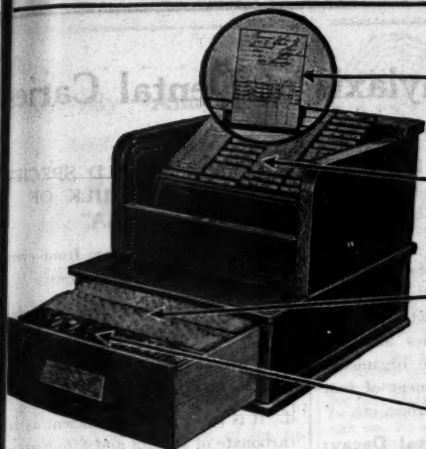
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Manufacturer of Dental Gold and Specialties

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Complete financial and clinical record of every case, with only "One Writing." Original record becomes permanent case history.

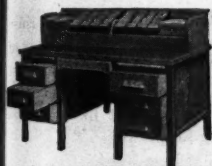
Every active account visible. These compartments contain records of patients under active treatment.

Permanent files for case histories after account is paid in full.

Temporary file for case histories after completion of the treatment but pending payment of the account.

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Permanent Records on a Single Form With "One Writing."



Secretary Design

Actually saves hours of time in keeping financial and case records.

Itemizes all time and material costs, giving you a complete, accurate and permanent charted record, which is acceptable to you for reference and is final in court testimony.

Speeds up collections. Diplomatically reminds former patients when teeth should be examined. Prevents the forgetting of appointments, and acknowledges to physicians work done for their patients.



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There is a McCaskey System to fit the available space in any dental office.

Mail that coupon today. Let us point out the unnecessary cost of your present method.

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The Prophylaxis of Dental Caries

The Cause of Dental Decay: The presence in the mouth of lactic and butyric acids formed by bacterial action on food particles.

The Results of Dental Decay: Roughening, softening and penetration of the enamel; damage to the dentine; the formation of cavities affording lodgment for pathogenic organisms, with subsequent development of root abscesses, gingivitis, pyorrhea, etc.

How to Prevent Dental Decay: The daily, systematic application of a suitable, non-irritating, non-abrasive alkaline fluid is the best and most practical method of controlling or preventing dental decay. This is not an empty assertion, but it has the support of authority.

Note: Thousands of your fellow-practitioners have made the discovery that "Phillips' Milk of Magnesia" is just such a fluid. It completely fills the bill. It is the ideal alkalizer for use in the human mouth.

WHY YOU SHOULD SPECIFY "PHILLIPS' MILK OF MAGNESIA"

- a. It is pure, i. e., free from every trace of deleterious substances.
- b. It is a hydrate and, therefore, has a special affinity for acids.
- c. It acts immediately and efficiently, and has no disagreeable effects.
- d. It is three times as efficient as bicarbonate of sodium and *fifty times* as powerful as lime water in neutralizing acids.

HOW TO USE "PHILLIPS' MILK OF MAGNESIA"

Kindly instruct your patients to rinse the mouth with a tablespoonful of "Phillips' Milk of Magnesia," at least twice a day, and invariably at bedtime, as acidity is most likely to develop during sleep.

Complete directions are in each 4 oz. and 12 oz. bottle.—Drugstores

PHILLIPS' Milk of Magnesia

Safest - - - - Best
Don't say "Anaesthetic"
Just say, Dr. Gilmore's

EXCEL

No Government blank required.
 Often imitated but never equaled.
 It has been on the market 28 years.
 2 oz. bottle free; send 25 cents for postage and packing.

2 oz. bottle, \$1; 12 oz. bottle, \$5;
 Try it and be convinced of its superiority.

Manufactured by
Excel Chemical Co.
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Tooth Brush Sterilizer



For the Operating Room

To sterilize those things that cannot be boiled—such as mouth mirrors, gutta percha points, rubber dam, silk ligatures, brushes and rubber cups for cleansing teeth, X-Ray films, tongue depressors, etc. No heat required.

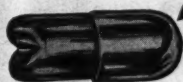
For the Patient at Home

To sterilize the tooth brush, plates, removable bridges, floss silk, toothpicks, tongue scrapers, etc. Sterilisation guaranteed; make your own tests. Retail price \$5.00. To the profession \$4.00. Through your dealer or direct. Booklet free.

Web Sterilizer Co.
 Mount Vernon N. Y.

THE ELECTRIC AMALGAMATOR \$10.00 C. O. D.

Bal. monthly
 There is now only ONE recognized scientifically true method of mixing.



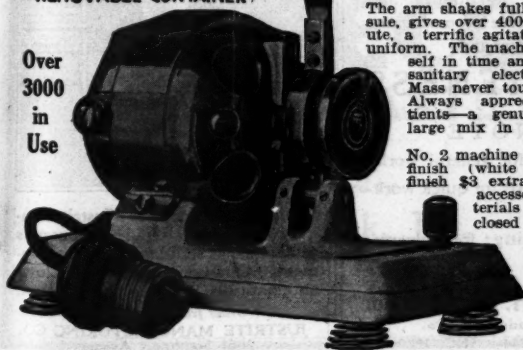
**ACTUAL SIZE
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The electric "Specific Gravity Impact" method employed with this machine is a correct metallurgical process of combining an alloy with mercury and so patented.

Hand mixing is prohibitive. Mortar and pestle is never a uniform mix

The arm shakes full length of capsule, gives over 4000 blows a minute, a terrific agitation but always uniform. The machine pays for itself in time and materials. A sanitary electric technique. Mass never touched by hands. Always appreciated by patients—a genuine small or large mix in half a minute.

No. 2 machine \$35.00 in black finish (white or mahogany finish \$3 extra) with \$11.75 accessories and materials free. Glass enclosed model complete \$50.00. Order from your dealer or direct. Interesting literature free.



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FLOSSY DENTAL MFG. CO.

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Keep your accounts so they can be collected

The CHANDLER
Dental Accounting System

minutely records exact work done
time consumed patient's balance all
collections all expenses; summary
gives complete income tax data; prophylactic notices. \$12.50 to \$22.50.
Ask your dealer; write for literature.

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For
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KEITH'S LATEST HIGHLY IMPROVED
DENTIST'S ARTICULATING PAPER
BLUE

S. H. REYNOLDS SONS COMPANY, 100 Boylston Street
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SOLE SELLING AGENTS

It has finger protectors and is extremely sensitive.

Sample on request.

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French's Dental Plaster

Still leads in quality and economy. We have what the profession demands

WHITENESS

NOTE

Regular: for general work
Impression: for quick working
Slow Setting: for vulcanizing.

Samuel H. French & Co.

Philadelphia, Pa.

EST. 1844 INC. 1920



Equip your office with a Justrite Sanitary Waste Pail. Used by thousands of dentists as standard Office equipment. Opens with one foot. Closes automatically. Booklet on Request.

Order from your dealer.

JUSTRITE MANUFACTURING CO.
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Not mere brushing—only active mouth glands will keep the teeth sound and clean. ❧ ❧ ❧ ❧

That the six tiny glands in the mouth are there to protect the teeth, is known by all dentists. Dentists realize, too, that unless these glands are properly stimulated, teeth decay.

The fluids from these glands clean the teeth as no ordinary brushing can. They neutralize acids and flow into the crevices of the mouth which are inaccessible to the tooth brush

Pebeco Tooth Paste so stimulates the salivary glands that a copious flow of saliva is constantly bathing the teeth and gums.

Pebeco can be safely used by everyone. It is a formula of a famous Hamburg Specialist, noted the world over for proficiency in the treatment of diseases of the mouth and throat.

PEBECO

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TOOTH PASTE

Manufactured by

Lehn & Fink, Inc.

635 Greenwich Street

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Fair Enough



YOU wouldn't buy an automobile without a demonstration, and salesmen are always quite willing to give you a *sample ride*.

And, as we see it—

There is no reason why you should invest a single penny in broaches until you know just what the broaches will do.

That's why we want you to ask us for samples of

Asko Broaches

And here is a coupon for that purpose.

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**A. S. Koch & Sons,
Lancaster, Pa.**

I would like to try Asko Broaches, send some free samples.

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EVERY CLOUD A SILVER LINING EVERY PLATE A ROSCINIAN LINING

THE Roscinian Linings are Metallic Linings of 24K gold or aluminum to be used on all new rubber dentures, counteracting the deleterious effects of the vegetable product caoutchouc, on the palatal tissues contacting with a denture in the oral cavity; especially valuable in preventing heated, spongy gums; producing and sustaining a strictly *oral hygiene*. The mechanical effect is really beautiful and your professional suggestion is gladly paid for.

The Roscinian Gold Lining XX (Our Standard)	\$5.00	{ Sufficient for One Upper Denture Sufficient for Four Upper Dentures
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Q Buy from your dealer or remit direct. Samples, literature and directions awaiting your request. Directions simple.

INSTRUCT YOUR LABORATORY

Q If necessary, send your lining cases to our laboratory for the Roscinian Linings to be put on, where your denture will be made and finished, representative of the highest art in this branch of prosthetic dentistry.

THE ROSCINIAN COMPANY

Metallurgists and Manufacturers
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Manufacturers to the Nobility of the Profession

For Nasal Prophylaxis and all Skin Troubles

A most reliable and efficacious medicinal adjunct for gum massage and the treatment of pyorrhea, consisting of a well balanced combination of germicidal and healing constituents.

Antiseptic, Healing, Curative FORMULA:

Oil of Cassia, Oil of Sassafras, Oil of Cayuput, Oil of Wintergreen, Tincture of Myrrh, Camphor, Menthol, Superfine Petrolatum.

Subsequent to scaling roots. Irrigating and cleansing the surrounding area, inject the ointment into the pockets until it oozes at the gingival. Anoint your nostrils every night. This renders the nasal tract clean and healthy, relieves Influenza, Hay Fever, Catarrh, Colds and Headaches. Relieves post-operative pain.



L. O. Green, D.D.S. Heyworth Bldg., Chicago, Ill.

Please send me full data on

☐ Green's Antiseptic Ointment

Write for samples

Name _____

Address _____

YOU MUST LINE ALL VITAL TEETH

before filling, if you would retain your reputation as an up-to-date practitioner.

GILBERT'S NON-CONDUCTIVE TOOTH LINING has been used for years by many of our foremost dentists.

It is a non-conductive fluid, which, when brushed over the surface of the cavity, hardens in a few seconds, leaving an indestructible film which protects from thermal change as well as from direct contact with the filling material.

Price, trial size.....\$.35
Regular size, glass stoppered
bottle.....\$.75

All goods returnable if not satisfactory. If your dealer does not carry them in stock, we will mail them on receipt of price.

Dentite

GILBERT'S

HAS NO SUPERIOR FOR HOLDING ARTIFICIAL DENTURES IN PLACE.

If it is a perfectly fitting new denture, you need it, as the patient more readily becomes accustomed to the new conditions.

If an old denture has become loose from absorption or any other cause, its use gives comfort and confidence to patients, because they soon learn that the teeth will not loosen.

When you sneeze, no denture is absolutely secure without Dentite.

Price per package \$.50 and \$1.00.

S. Edward Gilbert

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Tooth Brush Sterilizer



For the Operating Room

To sterilize rubber dam, mouth mirrors, gutta-percha points, brushes and rubber cups for cleansing teeth, silk ligatures, etc.

For the Patient at Home

To sterilize the tooth brush, plates, removable bridges, floss silk, toothpicks, tongue scraper, etc. Price \$5.00; 20% discount to the profession. Through your dealer or direct. Write for literature.

Web Sterilizer Co.

Mount Vernon N. Y.

Sales representatives wanted

Assistant's Gowns \$3⁵⁰ each

Three for
\$10.00

Attractive garments, well made of Indian Head long wearing material that launders well and holds the fit.

Sent prepaid on receipt of price.

Ask for Style 58.

Give bust measure

and say whether long or

short sleeves.

Other garments at

varying prices. Send for

catalog. Mention dealer.

**CONNECTICUT
COAT & COVER
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In Pyorrhea

and those diseases affecting the gum tissues, mouth disinfection is an essential of successful treatment.

The gums become so sensitive that harsh methods cannot be used, and yet the gums must be kept free from irritating food residues.

In such cases Dioxogen performs a real service, it keeps the gums clear, destroys pus and exudates, controls bleeding and has no irritating action.

Upon request a free sample will be sent to dentists who are not familiar with Dioxogen.

Every dentist should try

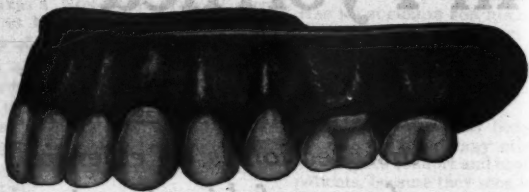
Dioxogen

The Oakland Chemical Co.

59 FOURTH AVENUE

NEW YORK

Famous Dentures



\$7.00 plus
teeth

Practice Builders

When you specify "Famous" you will get the best and most artistic rubber plate that can be produced—ABSOLUTELY.

Our Famous dentures are beautifully and scientifically constructed with Walker's or Gould's Granular Gum—artistically carved and festooned—Gold Dust or English base rubber, carved lingual surface to represent natural teeth, rugae in palate, etc.

Famous dentures are scientifically articulated on anatomical articulator.

The rubber is packed according to latest approved method and vulcanized at 305° for 2 hours and 35 minutes.

Famous dentures are made over stone models and are finished and polished with great care. (Many a good plate is ruined by careless polishing.)

Our fee for making a Famous Denture complete, exclusive of teeth is \$7.00, including trial.

A complete denture with Trubyte teeth or S. S. White new "Natural" teeth will cost \$9.60; with any composition pin tooth, \$7.70.

Send perfect impression, wax bite and shade of teeth.

Give mold of teeth if possible. State if trial is desired.

Specify Famous Dentures wherever possible and watch your practice grow.

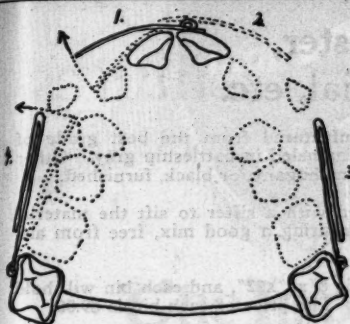
Write for price list and large book of beautiful color illustrations.

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WE SPECIALIZE IN PORCELAIN ROOT BRIDGE WORK
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The Simplicity of Tooth Movement

The Berthold Orthodontic Appliance

Dr. A. H. R. Berthold, who has charge of our Orthodontia Department, has evolved an entirely new principle in the construction of regulating appliances, the simplicity of which makes it possible for every dentist to include this most remunerative branch of dentistry in his general practice with absolute confidence and assurance and the certainty of perfect results. No experience necessary. We teach you step by step, and *If you follow our instructions you cannot fail.*

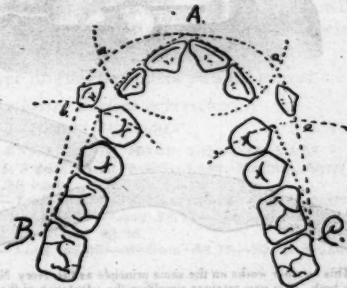
Force, speed and limit of motion can be controlled absolutely with our appliance. The maximum of force applied against a tooth is always decided by the patient—hence, *no sore teeth.*

With every appliance we send explicit instructions, and follow the case through with you to its successful completion. Send full upper and lower impressions—permit us to pour the models.

Appliances will cost from \$10.00 to \$30.00.

Continuous co-operation and service without additional cost, including needed repairs and reconstructions.

See Dr. Berthold's
series of articles on
orthodontia in *Dental Facts*.



REESE & WIEDHOFFT

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Bins for Plaster, Inlay Material, etc.

These bins are manufactured from the best grade of sheet iron, beautifully enameled in battleship gray. Other enamels, such as white, mahogany, or black, furnished.

Every bin is equipped with a sifter to sift the material into the plaster-bowl, insuring a good mix, free from air-bubbles.

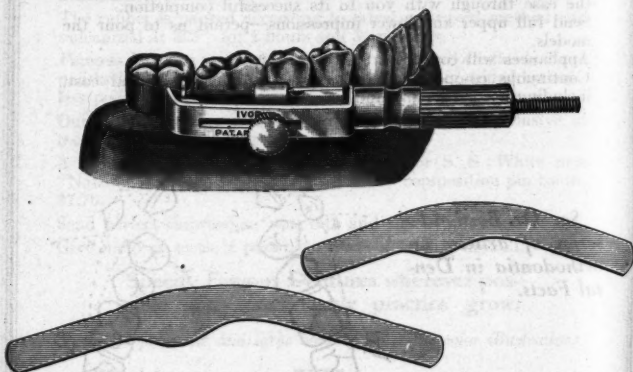
The size of each bin is 8"x8"x22", and each bin will hold about 25 lbs. of plaster. The price of each bin is \$9.00.

Order from your regular dealer.

Write us for our complete catalog of the goods we manufacture.

T. M. Crutcher Dental Mfg. Co.
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THE NEW IVORY BAND MATRIX RETAINER NO. 9



This retainer works on the same principle as the Ivory No. 8 Matrix Retainer, the same bands used for both. This new retainer simplifies the adaptation of the band to the retainer.

The band encircles the tooth and is held firm by the angular projecting arm, which abuts against the anterior buccal corner of the tooth. Price with bands, \$4.00; extra bands, per dozen, 40 cents.

J. W. IVORY ALL DEALERS—Manufactured by **Philadelphia, Pa., U. S. A.**



The Improved Jelenko Lingual Bar

The new Improved Jelenko Ready-Made Lingual Bar was designed to meet the demand of the profession and laboratories for a sturdier bar.

That is why our new bar is much heavier. This increased weight makes it stronger and more able to retain its form.

On this new bar we also adopted a flat anterior surface, as we discovered a flat bar, anteriorly, is more easily adapted than an oval bar.

These two improvements, plus the distinctive angular bevel of the old Jelenko Lingual Bar and its patented half-corrugated, half-flat anchorage ends, make the new Jelenko Lingual Bar *the* bar for you to use.

And this better lingual bar costs you no more!

Sold by better dealers everywhere.

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IMPROVED JELENKO READY-MADE LINGUAL BARS

18 Kt. Cased Gold (1/5 part 18 Kt. gold)—Long, Medium, Short
\$1.50 each. \$15.00 a dozen.

16 Kt. Solid Gold—Long \$2.50—Medium \$2.25—Short \$2.00

16 Kt. Extra Heavy Solid Gold—Long \$2.75—Medium \$2.50—
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18 Kt. Solid Gold—Long \$4.00—Medium \$3.75—Short \$3.50

J.E. JELENKO & Co
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American Cabinet No. 130

Up to the minute in every feature



American Dental Cabinet No. 130

A cabinet especially designed for the dentist who requires a high-grade cabinet that does not take up any unnecessary room.

It is compact, well-proportioned, and as well made and finished as our most expensive cabinets.

Equipped with whiteglass instrument trays, verde antique marble base, glass knobs, and vitrolite working surface, in fact it is a first class cabinet in every respect.

Size—Height $61\frac{5}{8}$ in., depth 12 in., width 35 in.

Your Office Furniture reflects your personality, that is why it is so necessary that you purchase a cabinet that will do justice to your profession.

American Cabinets have always been known for their honest quality, fair prices, and up to the minute appearance.

If you have not our latest catalog of Dental Office Furniture, write for it.

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1313 18th St.

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LOOK FOR MOSBY'S INSERT IN THIS ISSUE OF "ORAL HYGIENE"

You may order through your dealer

A Gift that Blesseth Him that Gives and Him that Takes

SEND an order for Christmas for this elegant reproduced etching (10 $\frac{3}{8}$ " x 14 $\frac{1}{2}$ ") of Canongate Tolbooth Edinburgh, by Hedley Fitton. Printed on the most beautiful of hand-made Japanese Silk Vellums, and signed by Mr. Munder, it is all that an etching can be while costing no more than a simple print. Price, \$2.00, postpaid, specially wrapped for Xmas giving. Money refunded if you are not more than pleased.

In consideration of quick action, we will include **FREE** with your order our 48-page catalogue—a work of art, with many beautiful pictures of places and scenes—regular price 50c.

Munder Prints have received highest awards wherever exhibited. Dr. McGee, Editor of "Oral Hygiene," writes that he is delighted with the beauty and faithfulness of his Munder Prints.

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Norman T. A. Munder & Co.

Art Publishers

Baltimore, Maryland

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Enclosed is \$2, for which send me, postpaid and specially wrapped, reproduced etching as described in December Oral Hygiene, together with Art Catalogue.

Name

Address

City State

Horrors!

A Date with the Dentist!

"I have an appointment with the Dentist," shudders the debutante.

"Gracious, how I pity you!" mutters her companion.

There you have it. The majority of us still look with apprehension, even fear, upon the innocent Dental chair. It is a weakness which we inherit from our forefathers, who, it appears, are really to blame for originating this prejudice and passing it along, even unto the present generation.



But let us not think too harshly of our worthy forbears. For in those first romantic days of Dentistry, when anaesthesia was only a lady's name and when germs were allowed to roam unmolested about the oral cavity—in those days, if a tooth was cited for extraction, the technique was simple—a strong wrist and endurance! And it was plainly written on the slabs of the age that PAIN was a necessary part of each extraction!

Is it any wonder, then, that many of the gentler folks of that period developed a prejudice toward the Dental chair—a prejudice which, handed down like an old superstition, is still manifested in such futile observations as: "Oh, Doctor, will it hurt?"

Fortunately, modern technique and modern science are rapidly eliminating the terror and danger from Dental operations. Scientific equipment, anaesthetics, and the high degree of training afforded the Dentist, make it possible to perform extractions and Dental operations without danger and without pain. In addition, the use of ORODYNE eliminates that dreaded after-pain, while a few tablets of SEP-TOX (quickly soluble antiseptic) given to the patient for home use after the extraction or operation, not only insures the injured tissues against infection, but materially assists in restoring the gums to a healthy and normal condition.



Sep-tox

(quickly soluble tablet)

An innovation in antiseptics, powerful yet non-poisonous; non-caustic; mildly astringent and refreshing to the taste. SEP-TOX protects injured tissues against infection and promotes rapid healing. Many Dentists now realize the safety and assurance afforded in dispensing a few tablets of SEP-TOX after each extraction and Dental operation.

Full information, together with sample bottle, awaits your request.

Orodyne

If you are looking for a preparation that will eliminate post-operative pain without producing any toxic effects and without irritating the stomach, you will be glad to learn about ORO-DYNE. Aside from its unusual ability in controlling pain, the remarkable feature of ORO-DYNE is the ease with which it is tolerated, even in large doses or in hypersensitive cases.

One trial bottle will demonstrate what we say. It is yours for the asking.



WINKWORTH & COMPANY
Pharmaceuticals

1747 Cass Avenue—Detroit, Michigan



A Mark of Progress

The Installation of a Model "CDX" Victor Dental X-Ray Apparatus

100% Electrically Safe and Shock Proof—no exposed high tension wiring. All low and high tension circuits "grounded." All contacts and connections under cover.

Exceptionally Compact Design. Occupies only slightly more space than a standard dental engine installation.

The Same Range of Service as is obtainable from any cabinet type of X-Ray apparatus employing the Right Angle Coolidge Tube.

Conserves Space, Time and Worry

Two years have been spent in checking durability and practicability in order to insure 100% perfection in design and satisfaction to the customer.

Descriptive bulletin on request

VICTOR X-RAY CORPORATION

Dental Department

236 S. Robey St., Chicago, Ill.





It's so easy to bathe handpieces in STERO-OIL

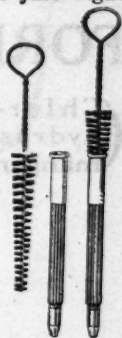
No fuss or bother! You just poke the handpiece clear to the bottom of the STERO-OIL bottle. Run it for a minute or two, in the bottle. Now wipe it dry. And the handpiece is clean, sterile, lubricated—and ready for use. STERO-OIL is not just an oil—it's a *bath* for handpieces. Dentists who saw it demonstrated at Cleveland quickly grasped its unique usefulness. STERO-OIL prevents handpieces or bur chucks from sticking or "freezing." It prevents the embarrassment of having oil run out and blacken the patient's lip. It keeps handpieces from wear-

ing out quickly. It cuts repair and replacement costs. And it gives the handpiece a pleasant odor. AND—you quit worrying about saliva working into the gears and being transmitted to the next patient. STERO-OIL is 75c.

Announcing STERO-BRUSH!

Shaped and built just right to remove old accumulations of oil and grit from inside the sheath of all straight handpieces at the close of the day. See the pictures! STERO-BRUSH is 35c.

Use the coupon to order either—or both. Both are guaranteed.



STERO-OIL CO., 447 Spreckels Building, San Diego, California:

- ☐ Please send one bottle of STERO-OIL and one STERO-BRUSH—upon receipt of which I will return \$1.10 in the mailing tube in which they come, or
- ☐ Please send STERO-OIL *only*, at 75c.
- ☐ Please send STERO-BRUSH *only*, at 35c.
- ☐ Charge through my dealer.

Dealer's name.....

Dealer's address.....

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My address.....

I will give STERO-OIL a 30-day trial and return for full refund if not satisfactory.

Thousands of Dentists Are Finding "Pyro-Form T" of Inestimable Value in Their Practice

PYRO- FORM T

(Chlor-oxy-
hydrastide-
manganidine)

In the entire history of dentistry we know of no pharmaceutical which has met with such instantaneous success as "Pyro-form T." Dentists have found, after careful investigation, that this pharmaceutical fulfills every medical requirement in the treatment of Pyorrhea, Trench Mouth and similar oral diseases.

The perfection of "Pyro-form T" for the exclusive use of the dental profession is the result of two years of intensive research work. Its use as a post-mechanical treatment—before the patient has been dismissed from the chair—has been submitted to the most severe clinical tests.

We want every member of the dental profession to know "Pyro-form T." If you have not already received a package, we shall be glad to forward one with our compliments.

Pyro-Form Company

San Bernardino

California

Pyro-Form Company,
San Bernardino, Calif.

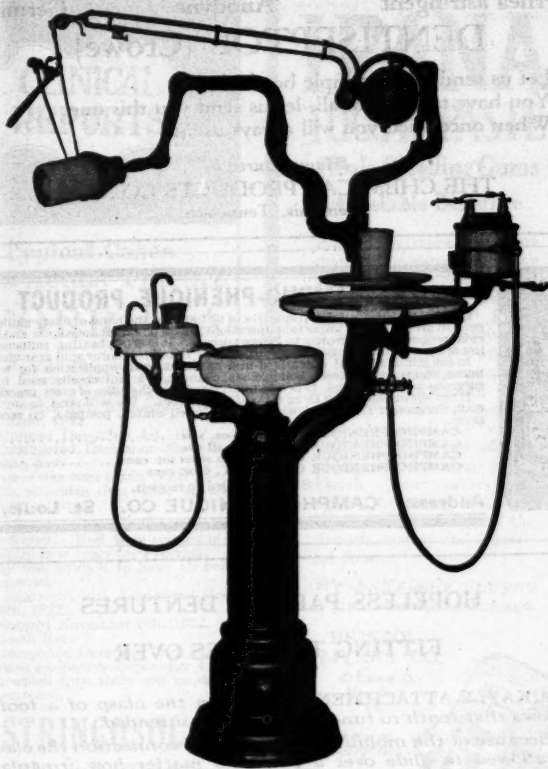
Gentlemen:

I shall be glad to receive a complete package of "Pyro-Form T" with the understanding that I am placed under no obligation.

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Weber Special Unit Model "E"

This Model consists of Fountain Cuspidor, either No. 55, 50 or 46; Weber Spray Heater, Automatic Cut-off with tubing and connections and Chip-blower; Bracket Table; Auxiliary Table, Bunsen Burner; Waste Cotton Receptacle; Adjustable Dental Light; pipes for Gas and Air and Sub-base for either concealed plumbing or pipes above the floor.

Write for prices and illustrations of other Models we make ranging in price from \$228.00 to \$288.00.

The Weber Dental Manufacturing Company
Canton, Ohio

Pyorrhea astringent

Anodyne

Germicide

DENTISEPTOL (Crowe)

Let us send you a sample bottle free.

You have tried them all, let us send you this one.

When once tried you will always use it.

*Manufactured by***THE CHEMICAL PRODUCTS CO., Inc.**

Memphis, Tennessee

**THE CAMPHO-PHENIQUE PRODUCT**

CAMPFO-PHENIQUE (liquid) is to be found at the hand of every skilled surgeon in all delicate or important operations, as its powerful antiseptic and germicidal properties help greatly to insure success. It exerts a healing influence that imparts a stimulus to the tissues calculated to induce more rapid granulation.

In the minor surgical operations and as an external application for wounds, burns, scalds, sores, ulcers, boils, felon, chancre, it is universally used by both surgeons and physicians. It is constantly needed in the office of every practitioner.

If not obtainable at the Drug Stores, order direct. We will send to any Physician, Surgeon or Dentist anywhere in the United States, postpaid, on receipt of price.

CAMPFO-PHENIQUE LIQUID, 4-oz. size \$1.20

CAMPFO-PHENIQUE LIQUID, small size30

CAMPFO-PHENIQUE POWDER, in sifter top cans75

CAMPFO-PHENIQUE OINTMENT, 4-oz. cans 1.20

Samples mailed on request.

Address: **CAMPFO-PHENIQUE CO. St. Louis, Mo.**

HOPELESS PARTIAL DENTURES AND FITTING TROUBLES OVER

A KAYLE ATTACHMENT placed on the clasp of a tooth allows that tooth to function as nature intended.

Because of the mobility of the KAYLE connection the clasp is allowed to glide over a tooth no matter how irregular, when inserting denture.

And as the clasp has not been opened up perfect retention of clasp on tooth is attained and no strain or "orthodontia" produced.

It allows for stress breaking and obtaining of suction which rigidly connected clasps oppose.

Can be used on any type of clasp.

Wear on teeth eliminated since clasps and denture do not have to move in unison.

Send for Illustrated Booklet

KAYLE ATTACHMENT FOR CLASPS

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CLINICAL REPORTS

Typical Cases From Actual Practice **PYORRHEA**

Mrs. B. Age 32. Entire mouth infected. Unsuccessfully treated for Pyorrhea one year previously.

First treated with Astringosol, November 22nd, 1922.

Pus stopped December 1st, 1922.

Case completed December 30, 1922.

No teeth lost.

This case was seen again September 4th, 1923, at which time there was no sign of any return.

Mrs. S. Age 35. Entire mouth badly infected. Had been treated intermittently four years for Pyorrhea.

Finally was advised to have all her teeth removed.

First treatment with Astringosol October 16th, 1922.

Pus stopped November 6th, 1922.

Two teeth lost.

Case completed December 2nd, 1922.

This case was seen on September 4th, 1923, at which time there was no sign of re-occurrence.

ASTRINGOSOL

Astringosol contains Zinc Chloride, Myrrh and Oil Wintergreen and is, in full strength, styptic, counter-irritant, and powerfully germicidal. In dilution it is stimulant, astringent, tonic, and a valuable antiseptic.

Frederick Stearns & Company
Detroit, Michigan
In Business Over 60 Years

STEARNS
ASTRINGOSOL
A PROPHYLACTIC MOUTHWASH

IPANA TOOTH PASTE

Heals Bleeding Gums

A Reliable Dentifrice

Every day more and more dentists are personally using Ipana and are recommending it to their patients.

For they know that Ipana is reliable in its effects. It cleans the teeth without detriment to the enamel or tissues of the mouth. Because of its Ziradol content, Ipana is an assistant to professional treatment of soft, spongy and bleeding gums. Finish your prophylaxis with a brushing of Ipana. Your patients will like the smooth, snappy and delightful flavor.

We shall gladly send you a professional package.

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MYERS CO.**

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*Makers of
Sal Hepatica*



When Abutments are Weak

Use **Dresch Attachments**

When Abutments are weak from traumatic occlusion, Dresch Attachments are indicated. The universal non-friction tissue-ward movement allowed by the Dresch Attachment prevents the denture acting as a lever on the abutments. And weak abutments are not endangered.

In addition to the Dresch Attachments, open the bite and relieve the trauma, and in a majority of cases the abutments will become firm.

The use of Dresch Attachments on firm teeth guarantees that they will remain firm. And the free lateral movement the Attachments allow, is assurance that there will be no uncomfortable binding. Dresch Attachments are used by thousands of dentists as an aid in constructing dentures that are tight, comfortable and safe.

Some dentists have written that our free literature was a revelation. Lest you forget later, write now.



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Holding the Mirror Up to Nature

Your patient would as soon have you use bright green rubber for the gum shade on his plate as to use a pink that was off color.

Your plates must be as near Nature as possible—which means you must use a superior rubber.

Eugene Doherty's New Improved Pink Rubbers

in light, medium light and deep shades, fully answer every possible requirement in the making of gum shades for plates. Not only do they make the most natural plates, but they are tough and durable to a remarkable degree.

Eugene Doherty Rubber Works, Inc.

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Address all correspondence to Dept. B.

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ALLONAL "Roche"

A new NON-NARCOTIC Drug

**ANALGESIC
SEDATIVE and HYPNOTIC**

Excellent results in painful affections, post-operative pains after extractions, pains of pulp, periostitic and periodontal pains, and in pre-operative work as a sedative for reducing the sensitiveness to pain in sensitive, nervous patients.

In larger doses it will not only quiet pain but produce sleep.

Bottles of
12 and 50 Tablets (½ gr)

DOSAGE: As sedative,
1 to 2 Tablets. As
analgesic, hypnotic,
2 to 4 Tablets.

Supplies for trial and Literature will be furnished on request

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*"The Greatest Branch of
Preventative Dentistry"*

A RECENT investigation in one of our largest cities shows that the progress and development of ninety percent of our school children is being retarded because of mental and physical deficiencies directly traceable to the effects of mal-occlusion. Practically the same appalling conditions exist throughout the entire country.

If these conditions are to be remedied it means that the general practitioner everywhere must devote his attention to this important work—it means that within a few years, one practitioner out of every ten will de-

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The Bacon method of correction enables every practitioner to approach mal-occlusion confidently. It is simple, safe, easily understood, and profitable. With an hour's study you can fit yourself for your first case.

Dr. Bacon's book on mal-occlusion covers this important field clearly and concisely. Every practitioner should read it.

There is a coupon below. Mail it today and the book "Bacon Technique in Orthodontia" will be sent to you free.



Bacon Manufacturing Co.

I am interested in the field of mal-occlusion. Please send me Dr. Bacon's book covering this method of correction.

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Minnesota

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KONDON'S

CATARRHAL JELLY

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For Catarrh—Influenza—Cold in Head—Nasal Catarrh—Stopped up Nose—Bad Breath—Inflammation of skin and tissue. Thousands of Dentists Physicians and Nurses recommend KONDON'S.

FREE OFFER

Any Dentist—Nurse or Doctor who will write us on their own stationery will receive FREE a tube of KONDON'S CATARRHAL JELLY for own personal use, and samples for patients and friends. KONDON'S is sold by the entire drug trade.

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Factors of Quartz Light

The most vital one is the equipment used. In the Kromayer lamp has been embodied an apparatus for convenient and practical usage with the quartz burner of the mercury anode type which has proven itself efficient in producing intense quartz rays necessary for therapeutic procedure coupled with the ability to stand continuous service.

We have reprinted several authoritative articles for free distribution to your profession of the work done in Pyorrhea, Post-operative work, Oral Infections and other conditions where quartz light is of benefit.

Request literature "R."

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Kiddies' Filling



is a filling material for children's teeth. It is germicidal, hardens the dentine and makes a very hard, dense filling.

It contains the purest flour silver and is made to work up something like cement; it also has one of the most powerful silver salts incorporated with it in proper proportions.

It will thoroughly sterilize infected and discolored dentine which cannot be safely removed in deciduous teeth or six year molars, and can be used as a base in any cavity where a hard, germicidal cavity lining is required.

KIDDIES' FILLING is especially designed for the long-felt want of a filling for children's teeth that will take care of the decalcified or decayed dentine which must be left sometimes in the cavity, and at the same time it will make an adhesive and hard filling.

Price in U. S. A. \$2.00

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FORT WAYNE, INDIANA

Forhan's

FOR THE GUMS

In the Interests of Oral Health

We like to feel that we are more than just a manufacturing company.

We prefer to be rated as a guardian of oral health, contributing, in some measure, to the happiness and welfare of the nation.

We fully realize that such a rating cannot be ours without the confidence and good will of the dental profession.

So it is our unbending aim ever to merit that confidence and good will.

If we shall continue to merit them, their possession will be to us a greater index of success than the increased earnings of a prosperous business.

Forhan's Pyorrhea Astringent is compounded to the formula of Dr. R. J. Forhan, and sold only to dentists to insure its restriction to professional use.

Formula R. J. Forhan, D. D. S.

Forhan Company

New York, N.Y.

**FORHAN'S, LTD.
MONTREAL**

The Vital Difference

*between a mucin solvent and
a paste or powder dentifrice*

ASSUMING, for the sake of the argument, that the average individual would and could wield brush and floss so skilfully that mucin film would be removed and tartar prevented as effectively with a paste or powder as with a liquid mucin solvent, such as Mu-Sol-Dent, there would still be this vital difference in results:

Paste or Powder

1. Cleaning by friction only—therefore requiring violent rubbing or scouring.
2. Abrasion of tooth enamel.
3. Irritation of gums and tender oral tissue.

Liquid Mucin Solvent

1. Gentle easy cleaning because mucin film has been softened and loosened by prior application of mucin solvent.
2. No abrasion of enamel.
3. No irritation, osmotic pressure of Mu-Sol-Dent approximating that of the blood, making it even more healing than salt water.
4. Incidental cleaning of throat and entire oral cavity by gentle but efficient solvent effect on mucous and all mucinous secretions.

*All of which is easily demonstrated by clinical tests which any dentist may conduct.
Samples FREE on request.*

Mu-Sol-Dent

dissolves mucin

FOR FREE SAMPLE—attach your professional card to this ad and mail to
V. B. Corporation, Department O-D., 916 Forbes Street, Pittsburgh, Pa.

An Alkalolized Mouth

is first of all a clean mouth, because ALKALOL dissolves mucin and its rich chlorine content inhibits bacterial action. Moreover, ALKALOL deodorizes, freshens and sweetens, opposes and corrects hyperacidity, helps to prevent caries, ALKALOL is remarkably soothing and healing. It assures mouth comfort used at the chair before and after extraction, during dental operation, as a dentifrice.

ALKALOL helps the dentist to get better results and to give his patient oral well-being. Fact is, the dentist who *knows* ALKALOL gives it his strongest and most sincere endorsement and approval by using it personally and advising his family to use it. Its easy to get acquainted with ALKALOL.

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DOWNIE'S IMPRESSION COMPOUND



A New Product
Fine Smooth Texture,
Non-Sticky.

Patented Separable
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The best you ever used, or **YOUR MONEY BACK.**
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**HARD BROWN BASE
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Easily and quickly adapted.

The best Hard Base made,
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UPPERS, LOWERS, ASSORTED.

Price: 1 box \$.60, 6 boxes \$3.30, 12 boxes \$6.00.

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In infiltration and blocking.
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"Butyn for dental injections in my practice is found to be a wonderful anesthetic. I have used the tablet form and solution and find the action (1) is very much quicker in infiltration and blocking than any other anesthetic I have ever used, with (2) much longer duration, and (3) less after symptoms."

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Ultimately—Why Delay?

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Send me one bottle Abbott's

Butyn-Epinephrin Tablets, at \$1.55

Butyn-Epinephrin Solution, at \$2.25

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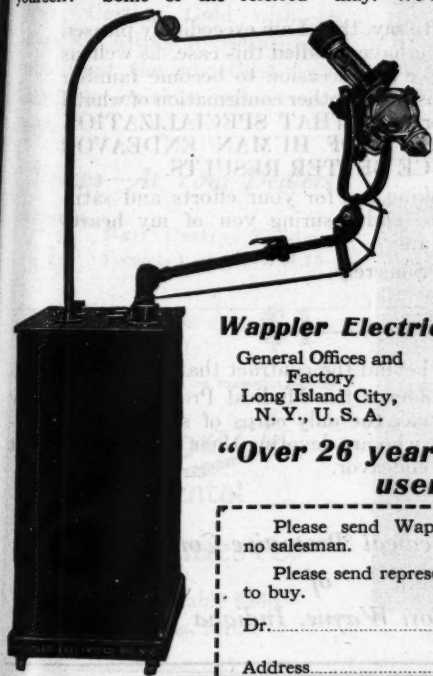
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"Over 26 years of satisfied users"

Please send Wappler Junior catalog—no salesman.

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A National Organization Built Upon Specialized Service

Theory Procrastinates But Protection Protects

The Medical Protective Co.,
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Gentlemen:

I am in receipt of your letter of November 4th informing me that the case against me has been dismissed.

Permit me to say, that I am exceedingly pleased with the way you have handled this case, as well as others that I have had occasion to become familiar with. To me it is just another confirmation of what I have claimed for years, **THAT SPECIALIZATION IN ANY BRANCH OF HUMAN ENDEAVOR WILL PRODUCE BETTER RESULTS.**

Again thanking you for your efforts and satisfactory services, and assuring you of my hearty appreciation, I am

Sincerely,

It is the service behind the contract that counts.

As a contract holder of the Medical Protective Company you have at your service the only corps of specialists in malpractice in existence, who are devoting their entire time to but this one line of legal endeavor.

*The Medical Protective Company
of
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Dr. Peck's Casting Investment Gives Better Results

With Less Work

For inlay abutments or three-quarter crowns use Formula 1, Hart Casting Gold with Dr. Peck's Casting Investment and you'll get the smoothest, most accurate castings you've ever seen.

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\$1

Both of these products are manufactured by

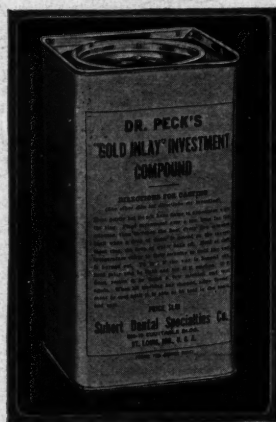
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Serves a Mighty Big Purpose



A Wonderful Comfort Powder
to assist patients with their den-
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when they most need encourage-
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35c, 60c and \$1.00
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CRESATIN

Try it in

Pyorrhea

Non-escharotic
Antiseptic
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In ozs. only
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your druggist's



It stands alone

How difficult was it for you to compile your income tax report?

How many dollars did you pay in excess of the proper tax simply because you could not figure, from your books, *all* the deductions to which you are entitled?

Perhaps you have an elaborate bookkeeping system and have still been unable to get these vital figures—this is the trouble with elaborate systems, they sometimes make you serve *them*, rather than serving *you*!

If you have been through this, you will welcome the

DOCTORS' DOLLAR SUMMARY

It is the multi-column, loose-leaf book—a single book—that accounts in a simple way, for every penny of every dollar that you take in or pay out.

It is so simple that your office assistant can take care of every item of it—and, at the end of the year, income tax figures can be taken off at once without further additions, subtractions or distribution being made.

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It is almost impossible to see a dentist personally to sell something, so I send this for 10 days' examination, which I feel you must see in order to appreciate.

Start now or any time during year.

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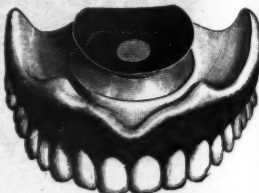
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18 YEARS AGO

The leading Dental Houses commenced to handle the "EUREKA" retainers on account of the design and the efficiency of attachment, allowing your patients to renew their own cups, which is the essential thing with a plate retainer.

Upper or Lower \$2.00
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"Why Pay More"



1905-1923

EUREKA SUCTION CO.
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Dr. _____, of Tulsa, Okla., was so delighted with inlay results due to GRAY JACKET that he wrote several friends suggesting they write us for free samples. *How about you?*

Just send your card. Pieper Dental Mfg. Co., 201 Garden City Bank, San Jose, Cal.

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1. Recognition of brother dentists and assistance in case of need when traveling.
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and sold throughout U. S. Dental Emblem Co.
P. O. Box 455 New Haven, Conn.

Price \$3.00. Order direct or through dealer.



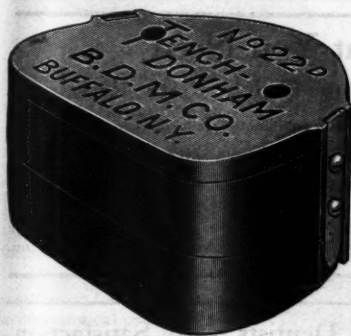
Patented Feb. 10th, 1920

Inside Dimensions

Front to back... 2-13/16"
Side to side... 3-13/16"
Height... 1-15/16"

PRICE

Iron... \$4.50
Brass... \$6.50



Patented Feb. 10th, 1920

Inside Dimensions

Front to back... 2-13/16"
Side to side... 3-13/16"
Height... 1-1/2"

PRICE

Iron... \$4.40
Brass... \$6.40

Can be used in 4 1/2" Vulcanizer only.

MODERN FLASKS

Here are two types of Donham Flasks, both made from designs suggested by Dr. Russell W. Tench, and we believe they contain every essential feature demanded by modern denture making.

Particular attention has been paid to inside dimensions, with a view to providing plenty of room for the largest cases, and still permit the use of these flasks with the regular Donham Spring Clamps. The bottoms and lids are of extreme thickness to prevent bending and the guides are fastened to the rings by means of screws. This latter feature provides for the removal of the guides in case it is desirable to refit the occlusal edges of the upper and lower halves.

The No. 22-D is more shallow than the No. 22-C, and will be found of value when it is desirable to place the bottom of the cast directly on the metal. Booklet No. 1, "JUST FLASKS" tells about some of the other features of these flasks, and we hope you will ask for a copy.

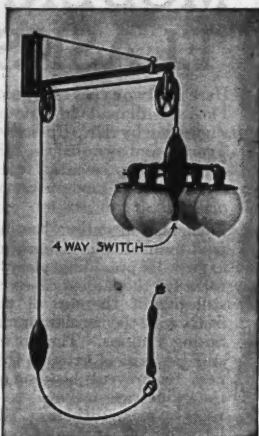
Your Dental Dealer can supply Buffalo Flasks.

**BUFFALO DENTAL
MFG. CO.
BUFFALO, N. Y.
U. S. A.**

"Makers of Lewis Cross
Bar Vulcanizers
for
Kerosene, Alcohol and
Electric Current."



The BRADCRAFT LIGHT



We are glad to announce our improved light at a very attractive price.

Ask your dealer about it or write us.

Sold by all good dealers.

T. F. O'NEILL & CO.

119 West Park Avenue
New Haven, Conn.

Just What You Need

Dr. Allens Lightning Quick Plate Repair

Replaces a tooth broken from a plate in ten minutes, while the patient waits, without vulcanizing, simple and easy to work.

Think what this means to you to be able to help your patient out of an embarrassing situation. Worth many times the cost.

Order a package from your dealer today and be ready for the next emergency.

Full instructions in each package, which contains sufficient material for 30 to 40 repairs. Sent direct on receipt of \$3.00.

The David Perry Co.

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Used now by 10,000 Dentists with Satisfaction

HOLG. -- Minute Plate Repair

PERMANENT

REQUIRES NO VULCANIZING
ALWAYS READY FOR USE

STRONG AND DURABLE

For replacing one or more teeth on vulcanite plates instantly without re-vulcanizing; a material that lasts the life of the plate; repairs made while patient waits. Used for many years with satisfactory results. No danger of plate being

distorted, as is frequently the case when vulcanized.

(enough for 30 to 40 repairs).....\$3.00

FOR SALE AT ALL LEADING DENTAL DEPOTS

MODERN DENTAL SPECIALTIES CO.

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NOVOCAIN

The Frequent Users' Economy Packages



The New Style
hermetically sealed
bottles of 100

N. S. Tablets "E" and "T"

\$1.20 per bottle

Box of 10 bottles \$10.00

For two percent. solution, dissolve one N. S. tablet "E" or one N. S. tablet "T" in one cc. Ringer solution.

The N. S. tablet "E" is preferable for mandibular injections and for anesthesia when pronounced ischemia is desired.

The N. S. Tablet "T" is preferred for anesthesia in non-surgical procedures and in patients suffering from anemia, arteriosclerosis and cardiac disorders and also in the very young and in the aged.



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One-Twenty-Two Hudson Street, New York.

Manufacturers of NOVOCAIN—"The Dependable Original"

Something Entirely New



The Inlay Vulcanizer

The first basic dental
patent in 20 years.

Make your plate the same as your inlays.

No boiling out—no packing—no
pressing—no laboratory lathe—no
dirt.

One pour of plaster—Exactly the same as an inlay.
—Finish with the chair engine—Exactly the same as an inlay.

Introducing the New Plate Material Hodite



No
Taste



No
Smell



Smooth
to Tongue



Absolutely
Unbreakable

Lighter than aluminum—stronger than steel—no
color change—not expensive—easily worked—Rubber is
porous, unsanitary, brittle. Rubber will be as dead as
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FLORIDA, U. S. A.

Torit Investment Heater No. 39

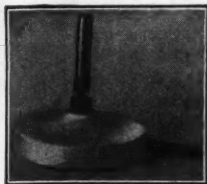
For use with acetylene only. No air pressure required. Heats the investment evenly and quickly. Heater No. 39 is furnished with 5 ft. tubing and connection for auto acetylene tank.

Price **\$10.00**

Torit Investment Heater No. 46

Same as No. 39, but for use with city gas. No air pressure required. Heater No. 46 is furnished with 5 ft. tubing for slipping over gas connection.

Price **\$10.00**

Torit Bunsen Burner No. 42

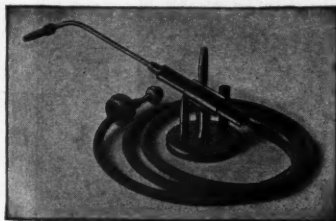
For use with acetylene only. No air pressure required. Furnished with 5 ft. tubing and connection for auto acetylene tank.

Price **\$4.00**

Three-Way Manifold No. 52

For connecting Torch No. 36, Investment Heater No. 39, and Bunsen Burner No. 42 to auto acetylene tank so that all three may be used at the same time off the same tank.

Price **\$5.50**

**Torit Dental Torch No. 36**

For use with acetylene only. No air pressure required. Capable of a great variety of gold and silver soldering and brazing. Consists of Torch with 4 different tips, torch and tip stand, 5 feet tubing and connection for auto acetylene tank.

Price as shown, - **\$7.50**

Order from your Jobber, or

ST. PAUL WELDING & MFG. CO.

179 W. Third Street

St Paul, Minn.

The Principle can
be Imitated---

The Technic can
be Copied---

But---

The accurate
interchangeability
of Steele's *can't* be
found in any other
artificial tooth.

The Columbus Dental
Manufacturing Co.
Columbus, Ohio

Physical Properties

OF vast importance in the manufacture of dental casting golds is the application of certain principles of metallurgy which enables the manufacturer to produce golds with certain physical properties.

DENSITY—The soundness of alloys and castings may be ascertained by density determinations. A good casting gold should be practically as dense when cast as when cold rolled. Determination of density of Tinker gold No. 1 reveals the following:

Density of gold cold rolled.....	16.80
Density of gold when cast.....	16.79

For best results in casting, especially indicated for three-quarter crowns, Carmichaels, and abutments, Tinker No. 1 is recommended. In order to identify these improved Tinker golds (with the desired physical properties), the signature E. T. Tinker is stamped on every piece and on the envelope. Be sure to look for it.

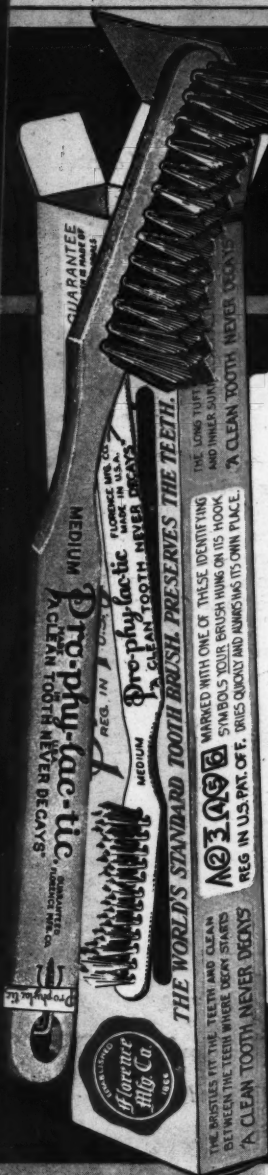


For sale at most dental depots

Spitco Smelting & Refining Co.

Purchasers and refiners of gold, silver and platinum

Minneapolis, Minnesota



THIS BRUSH *fits all the teeth*

The tooth brush that cleans all the teeth except three or four is shirking its duty.

Pro-phy-lac-tic Tooth Brushes are designed to do a thorough job of cleaning every tooth.

The tufted bristles and the curved handle enable you to clean in between the teeth and easily reach the inside surfaces and the backs of the back teeth.

Pro-phy-lac-tic Tooth Brushes are made in three sizes—adults', youths', and children's; and in three bristle textures—hard, medium and soft. Every brush sold in a sanitary yellow box and guaranteed—replaced if not satisfactory.

Dentists: Write for a supply of interesting booklets on the "Care of the Teeth," imprinted with your name and a free sample set of brushes for demonstration purposes.

FLORENCE MANUFACTURING COMPANY
Florence, Mass.

Sold by all dealers in the
United States and Canada

Brush Your
Upper Teeth
Downward
and
Your Lower
Teeth Upward

